

TO: Registration Section Division of Corporations		
SUBJECT: Lesro Industries,	INC.	
(Name of corpor	ation - must include suffix)	
Dear Sir or Madam;		
The enclosed "Application by Foreign Corporation "Certificate of Existence", and check are submitted to transact business in Florida.	for Authorization to Transact B to register the above referenced	susiness in Florida", I foreign corporation
Please return all correspondence concerning this ma	atter to the following:	
	nem O	000 <u>046</u> 943502
	of Person)	<del></del>
Lesro Industri	es, INC.	<u>wol-27827</u>
	Company)	21021
55 Peters	Road	
	ddress)	
Bloomfield, Co	nnecticut 06002	
(City/Sta	ite and Zip code)	
	O ) 243-3226	· · · · · · · · · · · · · · · · · · ·
(Name of Person) (Are	ea Code & Daytime Telephone	Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399  Enclosed is a check for the following amount:  \$\Begin{align*} \Pi \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  S78.75 Filing Fee & Certified Copy	SECRETARY OF STATE SECRETARY OF STATE SECRETARY OF STATE Certificate of Status & Certificate Copy
		12/4



#### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

November 28, 2001

JERRY LESHEM 55 PETERS ROAD BLOOMFIELD, CT 06002

SUBJECT: LESRO INDUSTRIES, INC.

Ref. Number: W01000027027

We have received your document for LESRO INDUSTRIES, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Michael Mays Document Specialist

Letter Number: 501A000630091

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Connec	r parmership if not so contained in the name	at present.) 3 06-089-8258
		(FEI number, if applicable)
State or country	under the law of which it is incorporated)	(PET number, it approache)
04/197		5. Perpetual
(Dat	e of incorporation)	(Duration: Year corp. will cease to exist or "perpetual
nogU	qualification	
Date first transa	icted business in Florida. If corporation has	s not transacted business in Florida, insert "upon qualification 1501, 607.1502 and 817.155, F.S.)
	(SEE SECTIONS 607.1	1301, 607.1302 and 617.133, F.S.)
55 Pe	ers Road; Bloomfield,	
	(Principal office	address)
55 Pet	ters Road; Bloomfield	, CT 06002
	(Current mailing	g address)
(Purpose	ture Sales (s) of corporation authorized in home state	or country to be carried out in state of Florida)
(Purpose	(s) of corporation authorized in home state	ent: (P.O. Box or Mail Drop Box NOT acceptable)
(Purpose  Name and st  Name:	(s) of corporation authorized in home state of reet address of Florida registered age	ent: (P.O. Box or Mail Drop Box NOT acceptable)
(Purpose  Name and st  Name:	(s) of corporation authorized in home state of reet address of Florida registered age Stephen b. Greenfiel 7000 w. palmetto Pk.	ent: (P.O. Box or Mail Drop Box NOT acceptable)  d, P.A.  Rd. #402
(Purpose  Name and st  Name:	(s) of corporation authorized in home state or reet address of Florida registered age Stephen b. Greenfield	ent: (P.O. Box or Mail Drop Box NOT acceptable)
(Purpose  Name and st  Name:  office Address:	(s) of corporation authorized in home state of reet address of Florida registered age Stephen b. Greenfiel  7000 w. Balmetto Pk.  Boca Raton  (City)	ent: (P.O. Box or Mail Drop Box NOT acceptable)  d, P.A.  Rd. #402
(Purpose  Name and st  Name:  Office Address:  O. Registered Having been na lesignated in th  urther agree to	(s) of corporation authorized in home state of reet address of Florida registered age Stephen b. Greenfield 7000 w. Balmetto Pk.  Boca Raton (City)  agent's acceptance: med as registered agent and to accept is application, I hereby accept the app comply with the provisions of all state	ent: (P.O. Box or Mail Drop Box NOT acceptable)  d, P.A.  Rd. #402
(Purpose  Name and st  Name:  Office Address:  O. Registered Having been na lesignated in th further agree to	(s) of corporation authorized in home state of reet address of Florida registered age Stephen b. Greenfield 7000 w. Balmetto Pk.  Boca Raton (City)  agent's acceptance: med as registered agent and to accept is application, I hereby accept the app comply with the provisions of all state	ent: (P.O. Box or Mail Drop Box NOT acceptable)  d, P.A.  Rd. #402 , Florida 33433 (Zip code)  service of process for the above stated corporation at sointment as registered agent and agree to act in this cutes relative to the proper and complete performance ons of my position as registered agent.

1). Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

#### 12. Names and business addresses of officers and/or directors:

A. DIR	RECTORS				
Chairman	m: Adam Leshem				_
Address:	14 Hammick Road	<u> </u>			_
	West Hartford, CT 06107	-			<b>-</b> -
Vice Cha	airman: Alice Leshem				_
Address:	14 Hammick Road				_
	West Hartford, CT 06107				
Director:	: <u>Jerry Leshem</u>				
Address:	36 Norwood Road				_
	West Hartford, CT 06117				_
Director	Ed Leshem Ste	eve Leshem			
Address:	40 Highwood Road 176	03 Lunnonhaus	Drive	<u> </u>	
	Simsbury, CT 06070 Gol	den, CO 8040	<u> </u>		
B. OFF	FICERS				
	n: Adam Leshem		,,	0	
	14 Hammick Road			<del></del>	_
Addicas.	West Hartford, CT 06107		<u> </u>	030	
t Vice Pre	esident: Alice Leshem		- <del>188</del> 2-	<u>_</u>	T
	14 Hammick Road		円の	2	
•	Work Hamilton and Octor		9 P	<u> </u>	_
Secretary	y. Ed Leshem		>======================================	8	_
•	40 Highwood Road; Simsbury, CT 0607				_
	. Jerry Leshem			•	-
	36 Norwood Road; West Hartford, CT	06117		**,,,,,	-
					-
NOTE:	If necessary, you may attach an addendum to the application listing add	ditional officers and/or	directors.		
13	Will Janen				
	Signature of Chairman, Vice Chairman, or any officer listed in	number 12 of the appli	cation)		_
14	Jerry Leshem, Treasurer (Typed or printed name and capacity of person signing	onelia-sia-)			_
	4 1 bear of brusses warms and cabacity of betsoft stantial	аррисацов)			

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE FOLLOWING IS SUBMITTED TO	
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)	
2. Connect CLT (State or country under the law of which it is incorporated)  (FEI number, if applicable)	
(Date of incorporation)  (Duration: Year corp. will cease to exist or "perperual")  6. UDON OLIGIFICATION	
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  (SEE SECTIONS 607.150), 607.1502 and 817.155, F.S.)	
55 Petas Pd; Bloomfield, CT 06002  (Current mailing address)	
8(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	x
9. Name and street address of Florida registered agent; (P.O. Box or Mail Drop Box NOT acceptable)  Name: Steven B. College And PA.	
Office Address: 7000 W. Antypetto P.C. Rd. #400  BOCA Botton  Florida 33433	FILE
(City) (Zip code)	Ü
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.	
(Registered agent's signature)	

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

### Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that

LESRO INDUSTRIES, INC.

incorporated under the laws of Connecticut is in existence.

Secretary of the State

Date Issued: November 20, 2001

O1 DEC -4 AM 2: 30
SECRETARY OF STATE