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PICK-UP	WAIT	MAIL		
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(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to	Filing Officer:			

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## <sup>®</sup> COVER LETTER

TO:	New Filing Sec Division of Co			
SHRJI	ECT: Bill G	Gray's Inc.		
эода:	EC1		ntion - must include suffix	
Dear S	ir or Madam:			
"Certif	icate of Existence		for Authorization to Transact Standing" and check are subm Isiness in Florida.	
Please	return all corres	pondence concerning this m	atter to the following:	
Joh	n Gonzale	ez		
		Name	e of Person	
Bill	Gray's Inc	<b>).</b>		
		Firm/	Company	
964	Ridge Ro	oad .		
		A	ddress	
Wel	oster NY 1	14580		
		City/Sta	te and Zip code	
jgon	zalez@bill			
		E-mail address: (to be us	sed for future annual report no	tification)
For fur	ther information	concerning this matter, plea	ase call:	
	0 1	50	7070450	
Joh	n Gonzale	at (		<del></del>
	Name of Perso	on A	rea Code & Daytime Telephor	ne Number
	STREET/COU New Filing Sec Division of Co Clifton Buildin 2661 Executive Tallahassee, FI	rporations g c Center Circle	MAILING AD New Filing Sect Division of Cor P.O. Box 6327 Tallahassee, FL	ion porations
Enclos	ed is a check for	the following amount:		
\$70	0.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status &

Certified Copy

## 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.

(Enter name of corporation; must include "INCORPORATED "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	
·	e s
(If some unavailable in Floride, onto alternate corporate name	a adapted for the number of transporting hydrogenia Florida
(If name unavailable in Florida, enter alternate corporate name  New York  (State or country under the law of which it is incorporated)	(FEI number, if applicable)
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
1D-21-1965 (Date of incorporation)	
	(Duration: Year corp. will cease to exist or "perpetual")
6/13/2013	
(Date first transacted business	in Florida, if prior to registration)
	1502. F.S., to determine penalty liability)
964 Ridge Road Webster New NY (Principal office ad	
	dracel
•	dress)
964 Ridge Road Webster NY 14580	
964 Ridge Road Webster NY 14580 (Current mailing ad	
964 Ridge Road Webster NY 14580	
964 Ridge Road Webster NY 14580 (Current mailing ad	dress)
964 Ridge Road Webster NY 14580 (Current mailing ad  Rental of residential property  (Purpose(s) of corporation authorized in home state or of	dress) country to be carried out in state of Florida)
964 Ridge Road Webster NY 14580  (Current mailing ad  Rental of residential property  (Purpose(s) of corporation authorized in home state or of the corporation author	country to be carried out in state of Florida)  O. Box NOT acceptable)
964 Ridge Road Webster NY 14580  (Current mailing ad  Rental of residential property  (Purpose(s) of corporation authorized in home state or of the corporation author	country to be carried out in state of Florida)  O. Box NOT acceptable)
964 Ridge Road Webster NY 14580  (Current mailing ad  Rental of residential property  (Purpose(s) of corporation authorized in home state or of the corporation author	country to be carried out in state of Florida)  O. Box NOT acceptable)
964 Ridge Road Webster NY 14580  (Current mailing ad  Rental of residential property  (Purpose(s) of corporation authorized in home state or of the Name and street address of Florida registered agent: (Purpose and Street address of Florida registered agent: (Purpose and Street address of Florida registered agent: (Purpose)	country to be carried out in state of Florida)  O. Box NOT acceptable)

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.

## State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of BILL GRAY'S INC. was filed on 10/21/1965, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



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WITNESS my hand and the official seal of the Department of State at the City of Albany, this 25th day of September two thousand and thirteen.

Couring Statement

Executive Deputy Secretary of State

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: BRUCE HEGE DORN Address: 635 TIMOTHY LANE WEBSTER NY 14580 Vice Chairman: JOHN (JONZALEZ Address: /030 LAKE RD LIEBSTER NY 14580 Director: SHARI NEGEDORN Address: 1030 LAKE RD WERSTER NY 14580 Director: KEITH HERMAN Address: 4295 LAKE RD WILLIAMSON NY 14589 B. OFFICERS President: DANIEL GRAY Address: 322 CARRIAGE PATH CT WEBSTER NY 14580 Vice President: KEITH HERMAN Address: 4295 LAKE RO WILLIAMSON NY 14589 1404 PENFIELD CENTER RD PENFIELD NY 14526 Address: Treasurer: JOHN GONZALEZ Address: 1030 LAKE RD WEBSTER \ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The office or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

(Typed or printed name and capacity of person signing application)

JOHN