F990000007/2

To: Qualification/Tax Lien Section		15
Division of Corporations	<i>≛.</i>	
SUBJECT: Sean_Johnson_Atel	: Tm	<u>=</u>
——————————————————————————————————————	n - must include suffix)	
	,	002765794—-5
Dear Sir or Madam:		-02/05/9901047003
The enclosed "Application by Foreign Corporation for a	Authorization to Transact B	*****87.50 *****87.50
certificate of Existence, and check are submitted to re	egister the above referenced	foreign corporation to
transact business in Florida.		-
Please return all correspondence concerning this matter	to the following:	
Sean Johnson		_
(Name of	Person)	·
Sean Johnson Int	erior Decoration	SEI VISI 991
(Firm/Con	npany)	
232 Madison Avenu	e, Suite 502	- 5 PAI
(Addre	ess)	
New York, NY 1001	6	_ ල විදු
(City/Stat		50 ATTE
•	*/	₹
Should you need to call someone concerning this matter,	please call:	902/8
Dennis J. Kesslerat (732	355 0156	=
(Name of Person) (Area C	Code & Daytime Telephone	Number)
STEDERITE A DEPOSIT		
STREET ADDRESS:	MAILING ADDRESS:	=
Qualification/Tax Lien Section	Qualification/Tax Lien Sect	ion
Division of Corporations	Division of Corporations	-
409 E. Gaines St.	P.O. Box 6327	···· ·····
Tallahassee, FL 32399	Fallahassee, FL 32314	•
Enclosed is a check for the following amount:		
	78.75 Filing Fee & Sertified Copy	587_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.

1. Sean	Johnson Atelier, I	nc.	•			:=	-
(Name of corp words or abbr	poration; must include the word eviations of like import in langu	"INCORPORA	arly indicate t	APANY", "Co	ORPORATI	ON" or	
natural person	or partnership if not so contained	ed in the name	at present.)		F	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	vare, USA		3. 13	3-374211 (FEI nu	1	Î	
(State or count	ry under the law of which it is in	ncorporated)		(FEI nu	ımber, if apı	olicable)	
4. <u>8–31</u> –		- 5.	Perpet		=	=	
(D	ate of incorporation)		Duration: Yes		ease to exis	t or "perpet	ual")
63-1-9	9			- :			
(Date fir	st transacted business in Florida	.) (SEE SECT	IONS 607.150	1, 607.1502 8	and 817.155	F.S.)	
	Johnson Atelier			-			
255 1	Chirteen Ave. South	Naples	, FL 341	02	· - <u>-</u>	- - 	
	(Curi	ent mailing ac	ldress)				HER STA
Retai	.l Sales			-	=		8 P
(Purpose	e(s) of corporation authorized in	home state or	country to be	carried out in	state of Flo	rida)	<u>حَمَّ : حَمَّ</u>
	reet address of Florida regis	_					
			(F.O. Box c	r iviaii Drop	Box NOT		~ *****
Name:	Charles J. Johnso	n			-	<u> </u>	55 ATE
Office Address:	300 North Ocean D	rive		-	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	, ,	<u>.</u>
	Riviera BEach		, Flori	da, 33404	= - 		
				(Zip cod	de)	_	
0. Registered a	gent's acceptance:					•	
			0				
aving been name this application	ed as registered agent and to ac , I hereby accept the appointme	cept service of	process for the	he above state	ed corporati	on at the pl	lace design
ompiy wiin ine pi	ovisions of all statutes relative.	to the brober c	u ugent ana a and complete	gree to act in performance	this capaci of mv dutie	ty. I furthe s. and I am	r agree to familiar u
nd accept the obl	igations of my position as regist	tered agent.			•	,	<i>,</i>
	Chades W.	Durson			ж.: -	_	,
	Rogic	tered agent's s	ignature)			_	
					=	2	

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.

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable) A. DIRECTORS (Street address only - P.O. Box NOT acceptable) Chairman: <u>sean</u> Johnson Address: 232 Madison Avenue. Suite 502 ___New York, NY 10016 Vice Chairman: Address: Director: Address: Address: B. OFFICERS (Street address only - P.O. Box NOT acceptable) Sean Johnson President: 232 madison Avenue, Sutte 502 Address: New York, NY 10016 Vice President: Address: Secretary: Address: Treasurer: Dennis Jules Kessler Address: 24 Coriander Drive Princeton, NJ 08540 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. nmson (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Sean Johnson President/ Chairman

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

State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SEAN JOHNSON ATELIER, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL PORATE EXISTENCE SO FAR AS THE A.D. 1999.

HAVE NOT BEEN ASSESSED TO DATE

AUTHENTICATION:

01-05-99

9503473

2939030 8300

991002894