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REFERENCE :

289249

5074089

AUTHORIZATION

COST LIMIT :

\$ 70.00

ORDER DATE: June 28, 1999

ORDER TIME : 2:16 PM

ORDER NO. : 289249-010

800002921518--5

CUSTOMER NO: 5074089

CUSTOMER: Mr. Charles P. Ferraro

Mr. Charles P. Ferraro

63 West Main Street

Babylon, NY 11702

FOREIGN FILINGS

EQUITY SETTLEMENT SERVICES,

INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Christine Lillich

TRANSMITTAL LETTER

To:

To: Qualification/Tax L Division of Corpora							
SUBJECT: Equit	Y Settlen (Name of corpo	ent Service pration - must include suffix)	s, Inc.				
Dear Sir or Madam:							
The enclosed "Application I "Certificate of Existence", a to transact business in Florida	nd check are submitted	n for Authorization to Trans I to register the above refere	act Business in Florida", inced foreign corporation				
Please return all corresponde							
_ Ch	_Charles P. Ferraro						
	(Nam	ne of Person)	· ·				
							
		n/Company)					
_65	west ma	Address) Y 1170a V/State/Zip)					
0 1	(4)	Address)					
120D	too n	Y 1170a					
	(City	7State/Zip)					
Should you need to call some	one concerning this m	natter, please call:					
Christopher Delido at (5/6) 370-1/22 (Name of Person) (Area Code & Daytime Telephone Number)							
(Area Code & Daytime Telephone Number)							
STREET ADDRESS:		MAILING ADDRESS	:				
Qualification/Tax Lien Section Division of Corporations	ı	Qualification/Tax Lien Division of Corporation					
409 E. Gaines St. Tallahassee, FL 32399 P.O. Box 6327 Tallahassee, FL 32314			·				
Enclosed is a check for the fo	llowing amount:						
	\$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.

1. EQUITY SE	TTLEMENT SERVICES, INC.		-
words or abbre	oration; must include the word "INCORPORATED", viations of like import in language as will clearly indicor partnership if not so contained in the name at present	cate that it is a corporation instead of a	
	ew York 3.	(FEI number, if applicable	
(State or count	ry under the law of which it is incorporated)	(FEI number, if applicable	le)
4.	9-18-97 5.	Perpetual	
	ate of incorporation) (Duration	on: Year corp. will cease to exist or "p	perpetual")
6. \ ()	Oon filing		
	st transacted business in Florida.) (SEE SECTIONS	607.1501, 607.1502 and 817.155, F.S	.)
7	5 west main stree	_+	
	*		
<u> </u>	aby lon New York (Current mailing address)	11708	
	. (Carrent manning address)		
8. Rea	al Estate Closinas	+ T.H. Thous	ance
(Purpose	e(s) of corporation authorized in home state or count		
O Name and st	treet address of Florida registered agent: (P.	O Boy or Mail Drop Boy NOT as	ocantibla)
9. Name and si	ireet addiess of Piorida registered agent. (F.	O. Box of Mail Drop Box 1401 ac	cepranie) 99
Name:	Corporation Service Company		
	1201 Hays Street		75
Office Address:			442 <u> </u>
	Tallahassee	, Florida, 32301	PH 3: 27
		(Zip code)	
10. Registered	agent's acceptance:		27 ATE RIDA
Having been nam	ed as registered agent and to accept service of proce	ess 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.

A. DIRECTORS (Street address only - P.O. Box NOT acceptable) Chairman: See attached officers/directors rider Address: ____ Vice Chairman: _____ Address: Director: Address: Address: B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: See attached officers/directors rider Address: _____ Vice President: Address: _____ Secretary: _____ Address: _____ Treasurer: ___ Address: _____ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Dres 13. _____ (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Charles terraro (Typed or printed name and capacity of person signing application)

SCHEDULE OF OFFICERS

&

directors

CHARLES P. FERRARO PRESIDENT 159 WEST BAYBERRY ROAD ISLIP NEW YORK 11751

CHRISTOPHER DELISLE VICE PRESIDENT 47 COMMUNITY ROAD BAY SHORE NEW YORK 11706

SECRETASSEE FLORIDA

State of New York Department of State

I hereby certify, that the certificate of incorporation of EQUITY SETTLEMENT SERVICES, INC. was filed on 09/18/1997, with perpetual duration, and that a diligent examination has been made of the index of corporation papers filed in 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 a subsisting corporation.

Witness my hand and the official seal of the Department of State at the City of Albany, this 25th day of June

eputy Secretary of State

one thousand nine hundred and N Eninety-nine.

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SECRETAINE FLURIDA