

F 00000000/105

TRANSMITTAL LETTER

To: Registration Section
Division of Corporations

SUBJECT: J. & J. COMO, JR., INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida",
"Certificate of Existence", and check are submitted to register the above referenced foreign corporation to
transact business in Florida.

Please return all correspondence concerning this matter to the following: 000003147760--7

-02/25/00--01068--014
*****70.00 *****70.00

WILLIAM J. BACHELER, CPA

(Name of Person)

BACHELER & COMPANY

(Firm/Company)

21 S. 12TH ST.

(Address)

PHILA., PA, 19107

(City/State/Zip)

Should you need to call someone concerning this matter, please call:

WILLIAM J. BACHELER

(Name of Person)

at (215) 569-2435

(Area Code & Daytime Telephone Number)

00 FEB 25 PM 12:06
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED
3/7

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

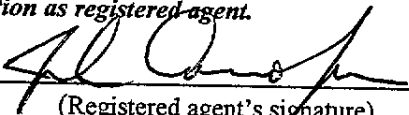
**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*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.*

1. J. E. J. Como, JR., INC.
(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. NEW JERSEY 3. 22-1518228
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. JAN 16, 1957 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUALIFICATION
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. a. 69 DOUGLAS DRIVE TOWACO N.J. 07082
(Principal office address)
- b. 69 DOUGLAS DRIVE TOWACO N.J. 07082
(Current mailing address)
8. HORSE RACING
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: JOHN COMO, JR.
Office Address: 8624 ESCONDIDO WAY EAST
BOCA RATON, Florida 33438
(Zip code)

10. Registered agent's acceptance:

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.

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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: JOHN COMO

Address: 69 DOUGLAS DRIVE
TOWACO, N.J. 07082

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: JOHN COMO

Address: 69 DOUGLAS DRIVE
TOWACO, N.J. 07082

Vice President: _____

Address: _____

Secretary: JOHN COMO JR.

Address: 69 DOUGLAS DR.
TOWACO, N.J. 07082

Treasurer: JOHN COMO JR.

Address: 69 DOUGLAS DR
TOWACO, N.J. 07082

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. _____

JOHN COMO, JR. - SEC. - TRES.
(Typed or printed name and capacity of person signing application)

FILED
00 FEB 25 PM 2:06
SECRETARY OF STATE
TALLAHASSEE FLORIDA

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

J. & J. COMO JR., INC.

With the Previous or Alternate Name

JOHN COMO, JR. AND SR. IN LIQUIDATION, INC.

*I, the Treasurer of the State of New Jersey,
do hereby certify that the above-named
New Jersey Domestic Profit Corporation was
registered by this office on January 16, 1957.*

*As of the date of this certificate, said business
continues as an active business in good standing
in the State of New Jersey, and its Annual Reports
are current.*

*I further certify that the registered agent and
registered office are:*

*John H Dorsey
714 Main Street
Po Box 228
Boonton, NJ 07005*

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

J. & J. COMO JR., INC.

With the Previous or Alternate Name

JOHN COMO, JR. AND SR. IN LIQUIDATION, INC.



IN TESTIMONY WHEREOF, I have
hereunto set my hand and
affixed my Official Seal
at Trenton, this
22nd day of February, 2000

Roland M Machold

Roland M Machold
Treasurer

00 FEB 25 PM 12:06
SECRETARY OF STATE
TALLAHASSEE FLORIDA