

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: Axiomatic Systems, Incorporated
(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:

Charles L. Wilder 500003190425--8
-03/30/00-01093-010
*****87.50 *****87.50
(Name of Person)

Packo & Co., CPA's
(Firm/Company)

301 Route 9 North
(Address)

Freehold, NJ 07728
(City/State/Zip)

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

Charles L. Wilder at (732) 462-4535 Ext 10
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
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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. Axiomatic Systems, 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 York 3. 13-3336449
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 3/26/86 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. April 1, 2000
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 417 Riverside Drive, # 8A
New York, NY 10025
(Current mailing address)

8. Consulting
(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: Robert Ferguson

Office Address: 5151 Collins Ave, # 523
Miami Beach, Florida, 33140
(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.*

Robert Ferguson
(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.

12. Names and addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

Robert Ferguson
417 Riverside Drive, # 8A
New York, NY 10025

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: Robert Ferguson

Address: 417 Riverside Drive, # 8A
New York, NY 10025

Vice Chairman: None

Address: _____

Director: None

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: Robert Ferguson

Address: 417 Riverside Drive, # 8A
New York, NY 10025

Vice President: Robert Ferguson

Address: 417 Riverside Drive, # 8A
New York, NY 10025

Secretary: Robert Ferguson

Address: 417 Riverside Drive, # 8A
New York, NY 10025

Treasurer: Robert Ferguson

Address: 417 Riverside Drive, # 8A
New York, NY 10025

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TALLAHASSEE FLORIDA

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

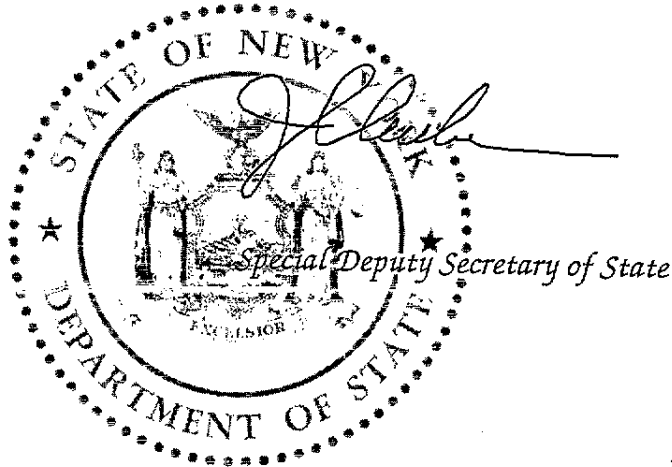
13. Robert Ferguson
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Robert Ferguson, President
(Typed or printed name and capacity of person signing application)

State of New York
Department of State | ss:

I hereby certify, that the Certificate of Incorporation of AXIOMATIC SYSTEMS, INC. was filed on 03/26/1986, 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 a subsisting corporation.

*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 10th day of March
two thousand.*



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