

FD00000003130

4.

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: Lexington Who's Who, 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:

Matthew Proman 500003269375--1  
(Name of Person) -05/26/00--01117--009  
\*\*\*\*78.75 \*\*\*\*78.75  
Lexington Who's Who, Inc.  
(Firm/Company)  
1 Boca Pkce 2255 Blades Rd. #416A  
(Address)  
Boca Raton Florida 33432  
(City/State/Zip)

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

Matthew Proman at (561) 241-8011  
(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

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

FILED  
00 MAY 26 PM 10:38  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

mtw  
6/2

**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. Lexington who's who, 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. 11-3432056  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. April 20, 1998 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 300 Garden City Plaza Suite 430  
Garden City NY 11530  
(Current mailing address)


8. Business Expansion  
(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: Matthew Proman

Office Address: 370 Southeast Mizner Blvd. # 1603  
Boca Raton, Florida, 33432  
(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.

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

FILED  
00 MAY 26 PM 10:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

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

President: Matthew Proman

Address: 370 S.E. Mizner Blvd, Apt. 1603  
Boca Raton Florida 33432

Vice President: Bardy Narod

Address: 3134 Ann St  
Baldwin Harbor Ny 11510

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**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. \_\_\_\_\_

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

FILED  
00 MAY 26 PM 10:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

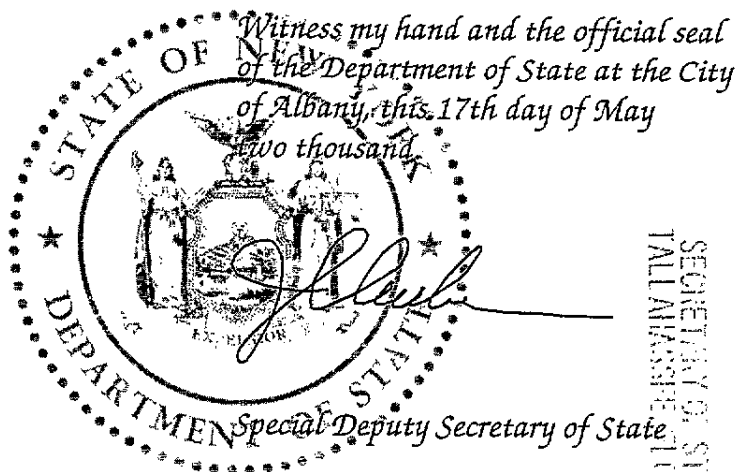
State of New York } ss:  
Department of State

I hereby certify, that the Certificate of Incorporation of LEXINGTON WHO'S WHO, INC. was filed on 04/20/1998, under the name of WHO'S WHO AMONG AMERICAS LEADERS, INC., 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.

A Certificate of Amendment WHO'S WHO AMONG AMERICAS LEADERS, INC., changing its name to KENSINGTON WHO'S WHO, INC., was filed 07/30/1998.

A Certificate of Amendment KENSINGTON WHO'S WHO, INC., changing its name to LEXINGTON WHO'S WHO, INC., was filed 12/11/1998.

\*\*\*



200005180289 46

FILED  
00 MAY 26 PM 10:39  
SECRETARY OF STATE  
TALLMAN/SEE 1000DA