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July 7, 2000

Department of State Division of Corporations 409 East Gaines Street Tallahassee, Florida 32399 400003318964---4 -07/11/00--01012--010 ******70.00 ******70.00

Re: NEW YORK EXECUTIVE OFFICE, INC.

Enclosed herein please find and original and (1) ONE copy of the Application by Foreign Corporation for Authorization to Transact Business in Florida for the above named NEW YORK corporation. Enclosed please find a check made payable to Florida Department of State in the amount of \$70.00 for the corporate filing fees. WHEN THE DOCUMENT IS FILED PLEASE RETURN IT TO MY ATTENTION IN THE SECOND FED EX ENVELOPE I HAVE ENCLOSED.

Please return proof of filing to this office in the enclosed Federal Express envelope for your convenience.

Thank you for giving this matter your attention.

Very truly yours,

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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.

(Name of corporation; must include the word "MCCONDON	
(Name of corporation; must include the word "INCORPORATED" words or abbreviations of like import in language as will clearly in	- L V C.
words or abbreviations of like import in language as will clearly in natural person or partnership if not so contained in the name at more	COMPANY", "CORPORATION" of
natural person or partnership if not so contained in the name at pre-	sent.)
2. New YARK	
(State or country under the law of which it is incompanied)	13-373 9548
2. New York (State or country under the law of which it is incorporated) 5. 10. 7.	(FEI number, if applicable)
4. 5/7/93 5. (Duration) (Duration)	enpetual
(Date of incorporation) (Duration	n: Year corp, will cease to exist on "
6. 7/1/2000	papenat)
(Date first transacted business in Florida.) (SEE SECTIONS (607 1501 607
7	507.1501, 607.1502 and 817.155, F.S.)
7. 115 DAKDALE LANE	
ROSLYN HEIGHTS NY	
7. 115 OAKBALE LANE ROSLYN HEIGHTS , NY 1157 (Current mailing address)	<u> </u>
A STATE OF THE STA	
8. Sales & Administrative 62 (Purpose(s) of corporation authorized in home state or country 9. Name and street address of Size in	- Fr. C
(Purpose(s) of corporation authorized in home state	neral Business furposes
at home state of country	to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Name: ROGER SINCEPIR	.
N	Total Or Wall Dtob Box WOL acceptable = =
Name: ROLER SINCLAIR	D. Box or Mail Drop Box NOT acceptable D
Office Address: 5841 NW 6041. St.	. Louis T.
PARKLAND EI	출시 2
	Florida, 33067 Pm W
PARKLAND FL.	(Zip code)
O. Registered agent's acceptance:	
laving been named as registered agent and to accept service of proces his application, I hereby accept the appointment as registered agent as	S for the above states as many
his application, I hereby accept the appointment as registered agent an ink the provisions of all statutes relative to the proper and complete pe	nd agree to act in this canacity. I further amount of
is the provisions of all statutes relative to the proper and complete per a bligations of my position as registered agent.	erformance of my duties, and I am familiar with and accept
	and accept
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(Registered agent's signatur	re)
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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)	A.
Chairman: VAVID HELM	9N
Address: $\frac{1}{5}$	DAVE LANCE
PDGC4N	11-ET CATE
Vice Chairman:	Heel 9111 5/14/15
Address:	
04710 118/11	1 0:
Director: DAVI) ItE CM	4//
Address:	FLE LANE
- FOSLYN HE	IGH15 NY 11577
Director:	
Address:	
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	
President:	TAL 8
Address:	
	6 2 - 1
Vice President:	S - F
Address:	
24,70 1261	Oπ ω
Secretary: $NAVAD IAECA$	LAN
Address: 5 OFF	THE LANE
_ PSSCYN HET	9HTS/N4/1577
Treasurer:	
Address:	
NOTE: If property	
NOTE: If necessary, you may attach an addendum to the application listing add	itional officers and/or directors.
13. (Signature of Chairman, Vice Chairman, or any officer listed in	number 12 of the prolication
14. DAVID G. HEC	11 AN SECRETARY
(Typed or printed name and capacity of person	a sighing application)

State of New York Department of State

I hereby certify, that the Certificate of Incorporation of NEW YORK EXECUTIVE OFFICE INC. was filed on 05/07/1993, 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 06th day of July two thousand.

Special Deputy Secretary of State

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