

FOU000005294

CAPITOL SERVICES d/b/a
PARALEGAL & ATTORNEY SERVICE BUREAU, INC.

(Requestor's Name)

1406 Hays Street, Suite 2

(Address)

Tallahassee, FL 32301 (904) 656-3992

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

FILED
00 SEP 20 PM 2:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-09/20/00--01030--016
*****78.75 *****78.75

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. AG Intermediaries, Inc.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 9/20 ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

RECEIVED
00 SEP 20 AM 11:03
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

OK
9/20/00

Examiner's Initials

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AG Intermediaries, Inc.
(Name of corporation - must include suffix)

00 SEP 20 PM 2:59
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TALLAHASSEE FLORIDA

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:

Michael D. McManus

(Name of Person)

c/o United Corporate Services, Inc.

(Firm/Company)

Ten Bank Street, Suite 560

(Address)

White Plains, New York 10606

(City/State and Zip code)

For further information concerning this matter, please call:

Michael D. McManus

(Name of Person)

at (914) 949-9188

(Area Code & Daytime Telephone Number)

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. AG Intermediaries, 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

(State or country under the law of which it is incorporated)

3. 13-3792147

(FEI number, if applicable)

4. July 23, 1993

(Date of incorporation)

5. Perpetual

(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. 335 Madison Avenue, 25th Fl., New York, New York 10017

(Principal office address)

335 Madison Avenue, 25th Fl., New York, New York 10017

(Current mailing address)

8. Insurance broker

(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: United Corporate Services, Inc.

Office Address: 9200 South Dadeland Blvd., Suite 508

Miami

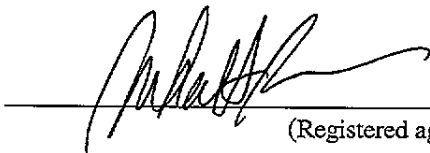
(City)

Florida 33156

(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 business addresses of officers and/or directors:

A. DIRECTORS

Chairman: SEE ATTACHED EXHIBIT A

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: SEE ATTACHED EXHIBIT A

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.

13. Deborah W. Feintuch 9/15/00
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Deborah W. Feintuch, Vice President
(Typed or printed name and capacity of person signing application)

EXHIBIT A

AG INTERMEDIARIES, INC. - DIRECTORS AND OFFICERS LIST

<u>NAME</u>	<u>OFFICE/TITLE</u>	<u>MAILING ADDRESS</u>
Bruce Reich	President	335 Madison Avenue, 19 th Floor New York, New York 10017
Samuel Bergman	Director	335 Madison Avenue, 25 th Floor New York, New York 10017
Irene Vitti	Director and Senior Vice President and Secretary	335 Madison Avenue, 25 th Floor New York, New York 10017
Michael Curley	Vice President	335 Madison Avenue, 19 th Floor New York, New York 10017
Al Carmenini	Vice President	335 Madison Avenue, 19 th Floor New York, New York 10017
Richard Dunn	Vice President	335 Madison Avenue, 19 th Floor New York, New York 10017
Deborah W. Feintuch	Vice President	335 Madison Avenue, 25 th Floor New York, New York 10017
Louis Giusto	Vice President	335 Madison Avenue, 19 th Floor New York, New York 10017
Kenneth C. Sherman	Vice President	335 Madison Avenue, 25 th Floor New York, New York 10017
Bret Derman	Assistant Secretary	335 Madison Avenue, 25 th Floor New York, New York 10017

State of New York } ss:
Department of State

I hereby certify, that the Certificate of Incorporation of AG INTERMEDIARIES, INC. was filed on 07/23/1993, with perpetual duration, and that a diligent examination has been made of the Corporate index and 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.

The Biennial Statement is past due.



Witness my hand and the official seal
of the Department of State at the City
of Albany, this 18th day of September
two thousand.

Special Deputy Secretary of State

00 SEP 20 PM 2:59
FILED
SECRETARY OF STATE
ALBANY, NEW YORK