F0000005396

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section Division of Corporations	e e	-	
SUBJECT: Allegheny Pwso	whe Agency, ation - must include suffix)	Inc.	- 4
Dear Sir or Madam:	•		
The enclosed "Application by Foreign Corporation as "Certificate of Existence", and check are submitted to transact business in Florida.	to register the above reference	Business in Florida", ed foreign corporation	· 4
Please return all correspondence concerning this ma		-07/21/0001034-	.——] -004 *87.50
_ Jannette Oss	_	**********	ະຽເ.ວ∪ ∕
Braun stein &	of Person) 4DE Stern, CAA's	—— ₩-[8585 0003331014- -09/20/0001070(_****100.00 ****10 0003331014	00.00
60 East 42nd	St. Suite 3	-09/20/0001070- 11**** 1050.00 ****10	-003
1	idress) U 10165-31 State/Zip)		
Should you need to call someone concerning this mat	tter, please call:		
Jamette Osser at (Z12	-) 681-3939	OO TAL	
(Name of Person) (Area	-) UP1-3939 a Code & Daytime Telephone	FIL SEP 20 CRETARY LLAHASSI	
STREET ADDRESS:	MAILING ADDRESS:		
Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	Qualification/Tax Lien Se Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	ction CRIDA	th
Enclosed is a check for the following amount:		ym 9/2	
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & (Certificate of Status	S78.75 Filing Fee & To	\$87.50 Filing Fee, Certificate of Status & Certified Copy	٥



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 26, 2000

JANNETTE OSSER 60 EAST 42ND ST., STE 3112 NEW YORK, NY 10165-3197

SUBJECT: ALLEGHENY PERSONNEL AGENCY, INC.

Ref. Number: W00000018585

We have received your document for ALLEGHENY PERSONNEL AGENCY, INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1150.00.

Enclosed please find a copy of section 607.1501, 617.1501, or 608.502, Florida Statutes, which lists those activities that do not constitute transacting business in this state. If after reviewing this section you determine erroneous information was inserted on the application, a notarized affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business in Florida prior to the year the application was submitted did not constitute transacting business pursuant to section 607.1501, 617.1501 or 608.502, Florida Statutes.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays Document Specialist

Letter Number: 800A00040673

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.	Allegheny Personnel Agency 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. 13-2916782 (FEI number, if applicable)	_
	(State or country unger the law of which it is incorporated) (FEI number, if applicable)	
4.	(Date of incorporation) 5. Per petual (Duration: Year corp. will cease to exist or "perpetual")	
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	
6.	10-1-99	
	(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	_
7.	6 East 39th St, Swite 501	_
	New York, NY 10016 (Current mailing address)	
	/ (Current mailing address)	-
8.	Personnel Placement	
	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	- 1
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	
	• • • • • • • • • • • • • • • • • • • •	$\dot{\Box}$
	Name: <u>Sus an Levin Gringauz</u>	
Oí	ffice Address: 10325 NW 13th Manor	
	Coral Spring, Florida, 33071 (Zip code)	
	(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.

Sevan Langues Stungas
(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)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)			
Chairman:			
Address:			
Vice Chairman:			
Address:			
Director:			
		-	
Address:		<u></u> .	
Director:			
Address:			
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	100		
	- <u>`</u>	3	
President: Alvin Perkel Address: 29 Neptune Ave. Woodmere, NY 11598		SEP :	1
Address: 2 Nophune // 1			7
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Vice President:		<u>ယ္</u> င္ပ	
Address:			
			· ··
Secretary:			
Address:			
	 		
Treasurer:			
Address:			
NOTE: If necessary, you may attach an addley dum to the application listing additional officers and/or directo	ns.		
13. Ohn Penky 7-18-2000			
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application	1)		
14. Alvin Perkel, President (Typed or printed name and capacity of person signing application)	<u> </u>		
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State of New York Department of State

I hereby certify, that the Certificate of Incorporation of ALLEGHENY ASSOCIATES, INC. was filed on 10/07/1977, under the name of ALLEGHENY PERSONNEL AGENCY, 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 ALLEGHENY PERSONNEL AGENCY, INC., changing its name to ALLEGHENY ASSOCIATES, INC., was filed 12/24/1999.

Witness my hand and the official seal of the Department of State at the City of Albany, this 07th day of July two thousand.

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