

CT CORPORATION SYSTEM

**F01000002369**

FILED  
MAY -3 PM 1:22  
TALLAHASSEE, FLORIDA

CORPORATION(S) NAME

Denholtz Management Corp.

300004133903--4  
-05/03/01--01092--004  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
2001 MAY -3 AM 11:24  
NOT RECORDED  
IN ADEQUATE  
SUFFICIENCY OF FILING

<input checked="" type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
<input checked="" type="checkbox"/> Foreign	<input type="checkbox"/> Reinstatement	<input type="checkbox"/> Other
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Change of RA
<input type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	<input type="checkbox"/> UCC
<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC	<input type="checkbox"/> CUS
<input checked="" type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	<input type="checkbox"/> After 4:30
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

Name \_\_\_\_\_  
Availability \_\_\_\_\_  
Document \_\_\_\_\_  
Examiner \_\_\_\_\_  
Updater \_\_\_\_\_  
Verifier \_\_\_\_\_  
W.P. Verifier \_\_\_\_\_

5/3/01

Order#: 4258641

Ref#: 3/2

Amount: \$ 5/3

*File First*

660 East Jefferson Street  
Tallahassee, FL 32301  
Tel. 850 222 1092  
Fax 850 222 7615

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. DENHOLTZ MANAGEMENT CORP.

(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 JERSEY

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

3. \_\_\_\_\_

(FEI number, if applicable)

4. January 3, 1997

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. upon qual.

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

7. 1600 St. Georges Ave. P.O. Box 112 Rahway, Nj 07065

(Current mailing address)

8. any and/or all lawful business

(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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida, 33324

(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.*

C T Corporation System

Armando Valdes  
(Registered agent's signature)

**ARMANDO VALDES**  
Assistant Secretary

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: Steven J. Denholtz

Address: 1600 St. Georges Ave. P.O. Box 112 Rahway, Nj 07065

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

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

Director: Steven J. Denholtz

Address: same as above

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

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

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

President: Steven J. Denholtz, President

Address: 1600 St. georges Ave. P.O. Box 112 Rahway, Nj 07065

Vice President: Mike Jaffe

Address: same as above

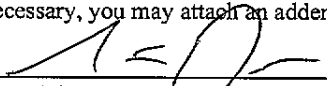
Secretary: Neil Heilberg

Address: same as above

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. STEVEN J. DENHOLTZ, President  
(Typed or printed name and capacity of person signing application)

FILED  
01 MAY '83 PM 1:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
LONG FORM STANDING WITH CHARTER DOCUMENTS

DENHOLTZ MANAGEMENT CORP.  
With the Previous or Alternate Name  
DENHOLTZ ASSOCIATES

01 MAY -3 PM  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*I, the Treasurer of the State of New Jersey,  
do hereby certify that the above-named  
New Jersey Domestic Profit Corporation was  
registered by this office on January 3, 1997.*

*As of the date of this certificate, said business  
continues as an active business in good standing  
in the State of New Jersey, and its Annual Reports  
are current.*

*I further certify that the registered agent and  
registered office are:*

*Paul Rosenberg Esq  
101 Eisenhower Parkway  
C/O Brach Eichler Et Als  
Roseland, NJ 07068*

*I further certify that as of the date of this  
certificate, the following amendments and changes  
are on file in this office:*

*Continued on next page . . .*

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
LONG FORM STANDING WITH CHARTER DOCUMENT

DENHOLTZ MANAGEMENT CORP.  
With the Previous or Alternate Name  
DENHOLTZ ASSOCIATES

FILED  
01 MAY -3 PM 1:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Name Change  
Alternate Name Filing

07/20/1999  
09/29/2000



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and  
affixed my Official Seal  
at Trenton, this  
30th day of April, 2001

A handwritten signature in cursive script, reading "Peter R. Lawrance".

Peter R Lawrance  
Acting State Treasurer

Continued on next page . . .

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
LONG FORM STANDING WITH CHARTER DOCUMENTS

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TALLAHASSEE, FLORIDA

*Note: Long form standings with charter documents may reflect two dates for filed amendments. The system processing date, which is the date of entry into the State's data base, is always shown immediately to the right of the amendment description. If shown alone, the system processing date also constitutes the filing date for the amendment. If an amendment was reviewed and stamped filed prior to the system processing date, a second date called the back-stamp date is shown at the far right margin. In cases where the two dates are shown, the date at the far right margin date is the actual filing date for the amendment.*