



FOI000006054

ACCOUNT NO. : 072100000032

REFERENCE : 581020 7197172

AUTHORIZATION :

Patricia Pignato

COST LIMIT : ~~\$ 70.00~~

700004692757--3

ORDER DATE : November 19, 2001

ORDER TIME : 10:04 AM

ORDER NO. : 581020-010

CUSTOMER NO: 7197172

CUSTOMER: Ms. Miriam Katz
National Financial Partners
787 7th Avenue
49th Floor
New York, NY 10019

1220

(5)

RECEIVED
01 NOV 26 AM 11:27
DIVISION OF CORPORATION

FOREIGN FILINGS

NAME: BARRY KAYE ASSOCIATES, INC.

*PLEASE CALL
ME with the
amount of penalty
fees.*

*Thanks
Sara*

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea -- EXT# 1114

EXAMINER: _____

BK

FILED
01 NOV 26 PM 2:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED FOR
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Barry Kaye Associates, 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. California
(State or country under the law of which it is incorporated)
3. 13-4043375
(FEI number, if applicable)
4. 12/7/1998
(Date of incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. 12/2000
(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. 5100 Town Center Circle, Suite 440, Tower II, Boca Raton, FL 33486
(Principal office address)
c/o National Financial Partners Corp., 787 Seventh Ave., 49th Fl., New York, NY 10019
(Current mailing address)
Insurance agency and related services
8. _____
(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: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(City) (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.

Corporation Service Company,

Tabatha Miller ASst VP
(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 officers/directors rider

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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TALLAHASSEE FLORIDA

B. OFFICERS

President: See attached officers/directors rider

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. Miriam I. Katz
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Miriam I. Katz Ass't Secretary
(Typed or printed name and capacity of person signing application)

Directors, Officers Report

Barry Kaye Associates, Inc.

Monday, November 12, 2001

DIRECTORS

Ross Campbell
Alan L. Kaye
Barry Kaye

Director
Director
Director

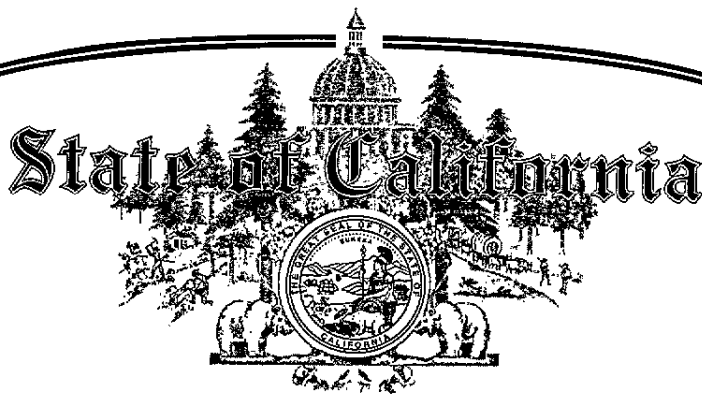
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TALLAHASSEE, FLORIDA

OFFICERS

Barry Kaye
Carole Kaye
Ross Campbell
Douglas W. Hammond
Lori Lieser
Miriam I. Katz

President
Treasurer
Vice President
Secretary
Vice President
Vice President
Assistant Secretary
Vice President
Assistant Secretary

Address for all directors and officers: c/o National Financial Partners Corp., 787 Seventh Avenue, 49th Floor, New York, NY 10019



**SECRETARY OF STATE
CERTIFICATE OF STATUS
DOMESTIC CORPORATION**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, BILL JONES, Secretary of State of the State of California, hereby certify:

That on the **7th day of December, 1998**, **BARRY KAYE ASSOCIATES, INC.** became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.

IN WITNESS WHEREOF, I execute this
certificate and affix the Great Seal
of the State of California this day
of November 20, 2001.



Bill Jones
BILL JONES
Secretary of State

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