

F020000000660

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ASSET MANAGEMENT, INC.
(Name of corporation - must include suffix)

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:

000004705940--7
-12/05/01--01051--004
*****87.50 *****87.50

ALEXANDRE J. ADES

(Name of Person)

W01-28609

ASSET MANAGEMENT, INC.

(Firm/Company)

5284 NW 106 DR

(Address)

CORAL SPRINGS, FL 33432 33076

(City/State and Zip code)

For further information concerning this matter, please call:

ALEX ADES

(Name of Person)

at (561) 416 4810

(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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 FEB -6 PM 8 13

FILED

mt
2/6



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

December 10, 2001

ALEXANDER J. ADES
5284 NW 106 DR.
CORAL SPRINGS, FL 33076

SUBJECT: ASSET MANAGEMENT, INC.
Ref. Number: W01000028009

We have received your document for ASSET MANAGEMENT, 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:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Michael Mays
Document Specialist

Letter Number: 501A00064809

02 FEB -6 PM 8:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

January 15, 2002

ALEXANDER J. ADES
5284 NW 106 DR.
CORAL SPRINGS, FL 33076

SUBJECT: ASSET MANAGEMENT, INC.
Ref. Number: W01000028009

We have received your document for ASSET MANAGEMENT, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You cannot add a limited partnership suffix to the end of a corporate name. Also you must add a major word to make a difference in the name.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Michael Mays
Document Specialist

Letter Number: 902A00002127

02 FEB -6 PM 8:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned ALEXANDRE J. ADES, do hereby certify
(Name)

that this Resolution of the Board of Directors of ASSET MANAGEMENT, INC.

(Corporate Name)

a corporation duly organized and existing under the laws of the State of CONNECTICUT

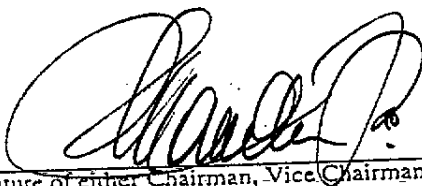
was duly adopted on JANUARY 4TH, 2002

Be it resolved, that ASSET MANAGEMENT, INC.
(Corporate Name)

organized and existing in the State of CONNECTICUT, hereby adopts the name

ASSET MANAGEMENT CT, INC. for use in Florida.

Dated: 1/4/02



Signature of either Chairman, Vice Chairman or any officer

ALEXANDRE J. ADES

Type or print name

02 FEB 6 PM 3:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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. ASSET MANAGEMENT, 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. CONNECTICUT 3. _____

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

(FEI number, if applicable)

4. May 1, 2001 5. PERPETUAL

(Date of incorporation)

(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. _____

(Principal office address)

5284 NW 106 DR, CORAL SPRINGS, FL 33076

(Current mailing address)

8. Any all Lawful purposes

(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: ALEX ADES

Office Address: 5284 NW 106 DR

CORAL SPRINGS

(City)

Florida 33076

(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.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 FEB -6 PM 8:13

FILED

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: ALEXANDRE J. ADES

Address: 5284 NW 106th Drive

Coral Springs, FL 33076

Vice President: _____

Address: _____

Secretary: LEENA M. ADES

Address: 5284 NW 106th Drive, Coral Springs, FL 33076

Treasurer: RQ

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. ALEXANDRE J. ADES, PRESIDENT

(Typed or printed name and capacity of person signing application)

FILED
02 FEB -6 PM 8:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State,
and keeper of the seal thereof, DO HEREBY CERTIFY, that

ASSETMANAGEMENT, INC.

incorporated under the laws of Connecticut is in existence.



Secretary of the State

Date Issued: October 15, 2001

FILED
02 FEB -6 PM 8:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA