F020000000972

TO: Registration Section Division of Corporation				
SUBJECT: Weinstern & Engler CPAS PC (Name of corporation - must include suffix)				
(Name of corporation - must include suffix)				
Dear Sir or Madam:		700	00049813374 -02/21/0201056018 *****87.50 ******87.50	
The enclosed "Application "Certificate of Existence", to transact business in Flor	and check are submitted to	r Authorization to Transact register the above referenc	Business in Florida"	
Please return all correspond	dence concerning this matte	er to the following:		
	Robert	A Engler of Person)	CPA	
	(Name o	of Person)		
Weinstein + E	Engler CPAS 1	OC.		
	(Firm/Co	ompany)		
357 LARKfield Road				
Weinstein + Engler CPAS PC (Firm/Company) 357 Larkfield Road (Address)				
East Northpo	xt NY 1/731			
East Northfort NY 1/731 (City/State and Zip code)				
For further information concerning this matter, please call:				
Robert A Engler at (5/6) 524-9901 (Name of Person) (Area Code & Daytime Telephone Number)				
(Name of Person)	(Area	Code & Daytime Telephon	e Number) N	
STREET ADDRESS:			166 21 F	
Registration Section		MAILING ADDRESS: Registration Section		
Division of Corporations	e.	Division of Corporations	5 5 9 5 9	
409 E. Gaines St. Tallahassee, FL 32399		P.O. Box 6327 Tallahassee, FL 32314	इसि ८	
Enclosed is a check for the	following amount:		int	
□ \$70.00 Filing Fee □	\$78.75 Filing Fee & Certificate of Status	ן \$78.75 Filing Fee & אָל Certified Copy	\$\\$87.50 \text{ Filing Fee,} \\ \text{Certificate of Status &} \\ \text{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. Weinstein + Engler CPAs PC				
(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. //-3257355 (FEI number, if applicable)				
(State or country under the law of which it is incorporated) (FEI number, if applicable)				
4. 3/3/95 5. Perpetual (Duration: Year corp. will cease to exist or "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. 357 LAKKIELD ROAD EAST Northport NY 11731 (Principal office address)				
(Principal office address)				
5Anz				
(Current mailing address)				
8. Certified Public Accountants (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)				
(r dipose(s) of corporation audiorized in nome state of country to be carried out in state of Fiorida)				
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)				
Name: Robert A Engler Office Address: 4176 NW 60th Circle				
Office Address: 4176 NW 60th Circle				
<u>BOCA RATON</u> , Florida 33496 (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 pla				

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: GAbriel Weinstein	
Address: 357 LAKKfreld ROAD	
	//731
Vice Chairman: Robert & Engler	
Address: 357 CANKField Road	2
	// 721
Cots 1 Destupos 3 Del	// 731
Director:	•
Address:	
The state of the s	
Director:	
Address:	
B. OFFICERS	-
President: GAGVIEL Weinstern	
	<u> </u>
Address: 35) LAKETE & KOAR	22 CO 1
EAST NortWort DI 1.	773/ 短龍 2 三
Vice President: Kobert A Englar	
Address: 357 CASKER ROAD	
Ceast North fort NY 1/7	3/
Secretary: Robert A Engler	
	Authort NY 11731
01. + 4 6 /	
Address: 357 CARKFIELD RODD &	voithort NY 1/731
Address: 35) CARKFIELD (LOAD E)	VOV/ VPG/1 7- 9 /1/3/
NOTE: If necessary, you may attach an addendum to the applicati	on listing additional officers and/or directors
1220	on instring additional officers and/or directors.
13. (Signature of Chairman, Vice Chairman, or any of	ficer listed in number 12 of the application)
_	VP, Secty, Tress.
(Typed or printed name and capacity of pe	

State of New York Department of State

I hereby certify, that the Certificate of Incorporation of WEINSTEIN & ENGLER, CERTIFIED PUBLIC ACCOUNTANTS, P.C. was filed on 03/03/1995, 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.

Witness my hand and the official seal of the Department of State at the City of Albany, this 01st day of February two thousand and two.

200202040095 56

Special Deputy Secretary of State

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