FOROMOSSA3

TO: Registration Section Division of Corporations	1918 FOR LONG CHCUS
SUBJECT: A.G. INCORPORATE	D d/b/a LUCIEN PICCARD/ ARNEX
(Name o	of corporation - must include suffix)
THE CHCLOSEG ADDICATION by Foreign Com	0310-00047-03943 poration for Authorization to Transact Business in Florida",
to transact business in Florida.	abmitted to register the above referenced foreign corporation
Please return all correspondence concerning	g this matter to the following:
JOHN A. KAMPI	WO2 DO
	(Name of Person)
	grand and the second of the se
4868 FOX HUNT TRAIL	(Firm/Company) SUBCIO8454709
	(Address) ******87.50 ******87.50
BOCA RATON, FLORIDA 33487	(Address)
((City/State and Zip code)
For further information concerning this matte	er, please call:
JOHN A. KAMPI	(561) 999-9804-414-8655 A
(Name of Person)	(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 Sta	e & 🗆 \$78.75 Filing Fee & 🗹 \$87.50 Filing Fee, atus Certified Copy Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE

Jim Smith Secretary of State

October 21, 2002

Capital Connection, Inc. 417 E. Virginia St. --Ste. #1 Tallahassee, FL 32301

SUBJECT: A.G. INCORPORATED Ref. Number: W02000030207

PLEASE OBTAIN THE ORIGINAL re-Submit FILE DATE

We have received your document for A.G. INCORPORATED 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.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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) 245-6967.

Michelle Hodges Document Specialist

DITYHECOLE' ELOSIOF CIVICADE OF BURNORALI MS 31VIS 30 INSKINVISC Letter Number: 602A00058149

02 NOV -4 MII: 40

BECEIVED

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned Sol Friedman	
(Name), the undersigned, do hereby certify	
that this Resolution of the Board of Directors of A.G. INC A/B/A Lucien Piccare 0/	- -
ARNEX (Corporate Name)	*
a corporation duly organized and existing under the laws of the State of New York	
was duly adopted on OS/31 2001	
Be it resolved, that A.G. Inc disin Luciew Piccared (Corporate Name)	
organized and existing in the State of NEW York, hereby adopts the name LUCIEN PICCARD INC.	
for use in Florida.	
Dated: 10/29 02	Tar.
Signature of either Chairman, Vice Chairman or any officer	
Sol Friedman	≨:
-p F	

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 ι

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.

	RPORATED			
words or abbrevi	ation; must include the word "INCORPOR ations of like import in language as will cle partnership if not so contained in the name	arly:	D", "COMPANY", "CORPORATION" or indicate that it is a corporation instead of a resent.)	
NEW YORK		3.	11-3614273	
(State or country	under the law of which it is incorporated)		(FEI number, if applicable)	
₄ June 4, 2	001	5.	PERPETUAL	<u> </u>
(Date	of incorporation)	-	(Duration: Year corp. will cease to exist or "perpetual")	
6	JALIFICATION			
(Date first transac	eted business in Florida. If corporation has (SEE SECTIONS 607.1	not t 501,	ransacted business in Florida, insert "upon qualification.") 607.1502 and 817.155, F.S.)	
7 1333 60T	H STREET BROOKLYN, NY. 1	121	9	
,	(Principal office	addr	ess)	
4868 FOX	(HUNT TRAIL BOCA RATON,	FL	33487	=
	(Current mailing	addr	ess)	
X	TION CENTER FOR LUCIEN P		ARD WATCHES	
(Purpose(s) of corporation authorized in home state of	or cou	intry to be carried out in state of Florida)	سيدسب
9. Name and str	<u>eet address</u> of Florida registered age	nt:	(P.O. Box or Mail Drop Box NOT acceptable)	؟ سبر سبر
Name:	JOHN A. KAMPI		mtry to be carried out in state of Florida) (P.O. Box or Mail Drop Box NOT acceptable)	
Office Address:	4868 FOX HUNT TRAIL			, E3
	BOCA RATON		, Florida 33487	-
	(City)		(Zip code)	
Having been nan designated in thi further agree to	s application. I hereby accept the application	ointh tes r		e I

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: ___ Address: Vice Chairman: Address: __ Director: Address: Director: Address: _ **B. OFFICERS** President: SOL FRIEDMAN 1333 60TH STREET, BROOKLYN, NY 11219 Vice President: Address: _ Secretary: _ Address: _ the state of the s Address: _ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) SOL FRIEDMAN / President

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

State of New York Department of State | ss:

I hereby certify, that the Certificate of Incorporation of A.G., INC. was filed on 05/31/2001, 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 18th day of October two thousand and two.

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Secretary of State