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#### TRANSMITTAL LETTER

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TO: Registration Section  Division of Corporations
SUBJECT: Mandel & Associates, 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:
Beth E. Spickler, Esq.
(Name of Person)
Stein Riso Mantel, LLP
(Firm/Company)
254 South Main Street, 5th Floor
(Address)
New City, NY 10956
(City/State and Zip code)
For further information concerning this matter, please call:
Beth E. Spickler, Esq. at ( 845 ) 634 1010
(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 \$\square \text{\$78.75 Filing Fee & Gertificate of Status} \square \text{\$78.75 Filing Fee & Certificate of Status} \square \text{\$78.75 Filing Fee & Certificate of Status & Certified Copy} \square \text{\$278.75 Filing Fee & Certificate of Status & Certified Copy} \square \text{\$278.75 Filing Fee & Certified Copy} \square \$278.75 Filing F

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### FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

November 26, 2002

BETH E. SPICKLER, ESQ. STEIN RISO MANTEL, LLP 254 SOUTH MAIN ST., 5TH FLOOR NEW CITY, NY 10956

SUBJECT: MANDEL & ASSOCIATES, INC.

Ref. Number: W02000033530

We have received your document for MANDEL & ASSOCIATES, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

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 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) 245-6025.

Trevor Brumbley Document Specialist

Letter Number: 502A00063542

#### 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.

Mandel &	Associates, Inc.	: †. <u>-</u>		_:^.			
words or abbre	oration; must include the word "INCORPO viations of like import in language as will cor partnership if not so contained in the nar	elearly	indicate that it is				
New York	<del>-</del>	3.			<b>च</b>		
(State or country	y under the law of which it is incorporated)		(F)	El number, if	applicable)		•
October	30, 2002	5.	_ <u>=</u> Perpetual		,1. <del>9</del> 5		•
(Dat	te of incorporation)		(Duration: Year	corp. will cea	se to exist or "pe	rpetual")	•
Upon qua	alification		<u> </u>				•
(Date first trans	acted business in Florida. If corporation had (SEE SECTIONS 607	.1501,	transacted busines 607,1502 and 81		nsert "upon qual	ification.")	
53 Commod	ore Road, Chappaqua, New Yo	rk l	10514	•••	. <del></del>		
·	(Principal offic	e addr	ess)		<del></del>		i
same as a	bove .		<u></u>		=.		
	(Current mailin	g addr	ess)		<del></del>		·
Coordinat	ion of management, design a	ind o	construction	projects	3		
	Ton of Langement, 1911g						. :
(Purpose	(s) of corporation authorized in home state	or cor	untry to be carried	out in state of	f Florida)		•
Nama and st	reet address of Florida registered ag	ent.	 (P∩ Box or Ma	il Dron Box	NOT accental	nle)	
				ii Diop Box	340 X deception	,,,,,,	
Name:	Bruce Mandel c/o Jerome Mar	idel			<u> = -</u>	-	
office Address:	1576 Misty Lane Drive			•	<u> </u>	≥0	
	Orange Park		— <del>≋⊡orido</del> 3	2003			12 11
	(City)		Florida 3	(Zip code)			(T)
	(easy)			(- r )		- <u> </u>	<u> </u>
	agent's acceptance:		•			2014-1 	ל כד.
esignated in the arther agree to	med as registered agent and to accept is application, I hereby accept the app comply with the provisions of all state familiar with and accept the obligation	ointn utes r	nent as registere elative to the pro	d agent and oper and con	agree to act in uplete perform	this capa	icity: I
	(Registered ase	111	See !		<del></del>		,

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:

	CIORS								
	Bruce Mandel		<del></del>	· .	盡				
Address:	53 Commodore Road			47	<del>-</del>	: -			
_	Chappaqua, NY 10514		<u> </u>	<u>.</u> . <u>.</u> 1				, = = == 	<u> </u>
Vice Chair	rman;	<u> </u>	<u> </u>	<u> </u>				η π. σ.	• · · ÷
Address:					<i>J</i> = -		1. i	<u></u>	
		<u></u>	<u>_</u>	. :	<u> </u>	·			*****
Director:		· <u>=</u>	* .					· · · · · · · · · · · · · · · · · · ·	
Address:		***	·		 			<u> </u>	
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Director:			·		ē,		 <del></del>	· Line	
Address:			<del></del>			,	· .		
				_		*		. 3 mm . 4	
B. OFFI	CERS	==							
President:	Bruce Mandel				***		E.c.	<u>Q</u>	
	53 Commodore Road				<u> </u>	<u>.</u>	CR		. "."
	Chappaqua, NY 10514	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<del></del>	<u> </u>			ASA		122
Vice Presi	dent:			<u> </u>			Fig	- j	3 <b>ê</b>
Address:		· · ·						15	
							<u> </u>	<u>.</u>	
Secretary:	Bruce Mandel		egy.				<u></u>	· · · · ·	بر ا ا
Address:	53 Commodore Road, Chappaqua, N	Y 10514	- 5		# <del>*</del>	1.3		<u>: ;;;;</u>	-
Treasurer:		<del></del>	-					<u> </u>	
Address:						-:			
NOTE: 1	If necessary, you may attach an addengum to the	ne application lis	ting additio	nal of	icers an	d/or dii	ectors.		
13	fall outel				 :e		æ	-77 -7	
	(Signature of Chairman, Vice Chairman	i, or any officer l	isted in nun	nber 1	2 of the a	applica	tion)	,	_
14. Br	ruce Mandel, President							4	

## State of New York Department of State

I hereby certify, that the Certificate of Incorporation of MANDEL & ASSOCIATES, INC. was filed on 10/30/2002, 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 10th day of December two thousand and two.

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