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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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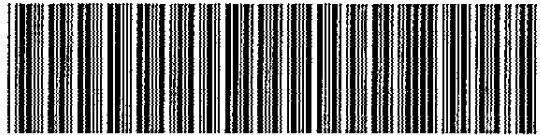
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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8-2-03

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PELLMAN ENTERPRISES, 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:

RONALD C. PELLMAN
(Name of Person)
PELLMAN ENTERPRISES, INC.
(Firm/Company)
9017 PROVINCE STREET
(Address)
SARASOTA, FLORIDA 34240
(City/State and Zip code)

For further information concerning this matter, please call:

RON PELLMAN at (941) 377-8999
(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 Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee & Certificate of Status & Certified Copy

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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. PELLMAN ENTERPRISES, 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. 06-1414840
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 12-1-94 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. 9017 PROVINCE STREET SARASOTA, FL 34240
(Principal office address)
9017 PROVINCE STREET SARASOTA, FL 34240
(Current mailing address)
8. CONSULTING
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

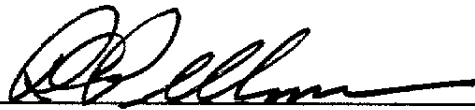
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: RONALD C. PELLMAN

Office Address: 9017 PROVINCE STREET
SARASOTA, Florida 34240
(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.

 8-2-03
(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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: RONALD C. PELLMAN

Address: 9017 PROVINCE STREET

SARASOTA, FL 34240

Director: _____

Address: _____

B. OFFICERS

✓ President: RONALD C. PELLMAN

Address: 9017 PROVINCE STREET

SARASOTA, FL 34240

Vice President: _____

Address: _____

✓ Secretary: SCOTT D. PELLMAN

Address: 125 BREAKNECK HILL RD.

MIDDLEBURY, CT 06762

Address: _____

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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. RONALD C. PELLMAN PRESIDENT


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

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

PELLMAN ENTERPRIZES, INC.

incorporated under the laws of Connecticut is in existence.


Secretary of the State

Date Issued: July 30, 2003