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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Continental Acquisition Services 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:
Christine McFadden
(Name of Person)
Continental Acquisition Services Inc.
(Firm/Company)
_ 5 Whitewood Road
(Address)
White Plams NY 10603 (City/State and Zip code)
(City/blate and 21p code)
For further information concerning this matter, please call:
^· · · · · · · · · · · · · · · · · · ·
Chris McFadden at (914) 347 2889
(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 Pivision 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 & ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fec, Certified Copy Certificate of Status & 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. Continental Acquisition Services Inc.	
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	
Continental Acquisition Services Inc. of FLA. (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
2. New York 3. 13-4127886 (State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. lollo 5. Perpetual (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. 32 East Field Drive, Bedford, NY 10506 (Principal office address)	
5 Whitewood Road, White Plains NY 10603 (Current mailing address)	
8. Providing land acquisition and relocation services. (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: NRAT Services Fix	
Office Address: 526 E. Park Ave	
Tallahassee , Florida 32301 (City) (Zip code)	C
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	s.
and I am familiar with and accept the obligations of my position as registered agent.	.,
NRAI Services, Inc.	
(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: Michael D. Hill
Address: 32 E Field Drive, Bedford NY 10506
Vice Chairman: Bah A. Hill
Address: 32 F. Field Drive Bedford NY 10506
Director:
Address:
Address.
Directors
Director:
Address:
B. OFFICERS President: Michael D. Hill Address: 32 F Field Drive, Bedford, NY 10506
Vice President: Beth A. Hill Address: 32 F. Field Drive, Bedford NY 10506
Secretary: Christine McFadden
Address: 5 Whitewood Rd, White Plains, NY 10603
Treasurer: Omstine Mctaden
Address: 5 Whitewood Kd, WhitePlans, NY 10103
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application)
14. Christine M. Fadden Servetary Treasurer
(Typed or printed name and capacity of person signing application)

State of New York Department of State

I hereby certify, that the Certificate of Incorporation of CONTINENTAL ACQUISITION SERVICES, INC. was filed on 06/07/2000, 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.

The Biennial Statement is past due.

Witness my hand and the official seal of the Department of State at the City of Albany, this 05th day of November two thousand and three.

Secretary of State

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