F04000003584

(R	equestor's Name)
(A)	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(B)	usiness Entity Name)
	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
ame vailabilit y	
locument Examiner	Dice
Updater	Proffice Use Only
Undater Verifyer	DCC
naknowledgement	DCC
P. Verifyer	ucc



400035237314

05/04/04--01027--002 **78.75

SECRETARY OF STATE

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations							
•		<u> </u>					
SUBJECT: Christofie Silver, Inc. (Name of corporation - must include suffix)							
()	Name of corporat	ion - musi include sullix)					
Dear Sir or Madam:							
The enclosed "Application by Foreig "Certificate of Existence", and check transact business in Florida.	en Corporation for a care submitted to	or Authorization to Transact Bus register the above referenced for	iness in Florida", preign corporation	 to			
Please return all correspondence con	cerning this matt	er to the following:		**-			
Regina C	lerkin			<u>_</u> _			
	(Name	of Person)					
Create-A	A-Corp.com			·			
	(Firm/C	Company)					
PO Box	9227						
	(Ad	dress)	TAS 2				
West Wi	ndsor, NJ 085	50-0927	SECR	-11			
	(City/State	e and Zip code)	SEE SA				
For further information concerning this matter, please call:							
Regina Clerkin	at (877) 462-2388 ext 17.					
(Name of Person)		a Code & Daytime Telephone N	Cumber)				
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 Enclosed is a check for the following	g amount:	MAILING ADDRESS: - Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		· -			
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy 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. Christofle Si	ilver, Inc.			
words or abbro	poration; must include the word "INCORPOR eviations of like import in language as will cl or partnership if not so contained in the name	learly	indicate that it is a corporation inst	
2. New York		3.	13-1871909	
	ry under the law of which it is incorporated)		(FEI number, if app	licable)
4. March 13, 19	58	5.	Perpetual	
(Da	ate of incorporation)		(Duration: Year corp. will cease to	exist or "perpetual")
S. Upon qualific	cation			
	·		transacted business in Florida, inser 607.1502 and 817.155, F.S.)	t "upon qualification.")
7. 50 Main Stre	et, White Plains, NY 10606			
	(Principal office	addı	ess)	
50 Main Stre	et, White Plains, NY 10606			
	(Current mailing	addr	css)	
	Silver manufacturing			
(Purpose	c(s) of corporation authorized in home state of	of con	intry to be carried out in state of Flo	rida)
). Name and st	reet address of Florida registered age	nt:	P.O. Box or Mail Drop Box NO	(T accentable)
Name:	NRAI Services, Inc.		<u></u>	
ivanic.				
Office Address:	526 E. Park Avenue			\$,0
	Tallahassee		, Florida <u>32301</u>	
	(City)		(Zip code)	哲・三
0 Pagistarad	agent's acceptance:			SSE
laving been na	agent's acceptance. med as registered agent and to accept so	ervio	e of process for the above states	d corneration at the place
esignated in th	is application, I hereby accept the appor	intm	ent as registered agent and agre	ee to att in this capacity.
urther agree to	comply with the provisions of all statut	ēs re	lative to the proper and comple	te performance of my
	familiar with and accept the obligation	is of	my position as registered agent	· 🖫 🗗
7	IRAI Services, Inc.			
-	By: Zuema M.t bus	U	In Asst Sew	
	(Registered agent'	's sig	nature) (į.

11. Attached is a certificate of existence unity 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: Nicolas ABBOUD					
Address: 112 RUE AMBROISE CROIZAT					
93206 ST. DENIS FRANCE					
Vice Chairman					
Address:	_				
Director: SAFA HUMMEL					
Address: 50 MAIN SOR SUITE 1275					
WhITE PLAINS, NY 10606					
Director: ChRISTINE MASCELLA					
Address: 112 RUE AMBROISE CROIZAT					
93201 ST. DENIS, FRAINCE	·				
B. OFFICERS					
President: SAFA HUMMEL					
TO 44.					
WhITE PLAINS, MY, 10606					
Vice President: PAVEL ZILBERMAN					
Address: 50 MAIN STR.	Ec Se				
WhITE BAINS, NY 10606 Secretary: RICHARD K BERNSTEIN					
could a diameter of the ACC March 10000					
Address: 35/19A0/150N HVE., 177, 199 10022	No. 1				
Treasurer:					
Address:					
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.					
Pare Therenan					
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of	of the application)				
	PRESIDENT				
(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 CHRISTOFLE SILVER, INC. was filed on 03/13/1958, fixing the duration as perpetual, 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.



学学:

Witness my hand and the official seal of the Department of State at the City of Albany, this 27th day of April two thousand and four.

Secretary of State

200404280557 * 30

SECRETARY OF STATE