

F040000002117

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

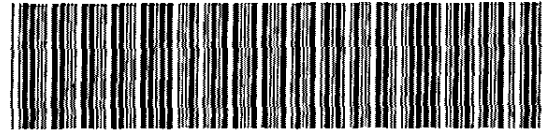
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04/07/04--01021--001 \*\*87.50

AND  
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04 MAY 17 AM 10:50  
RECEIVED  
CLERK OF DISTRICT COURT  
DALLAS, TEXAS

MB  
518-04

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** National Coin Exchange 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:

Michele Needle

(Name of Person)

National Coin Exchange Inc.

(Firm/Company)

450 Seventh Ave, 45th Floor

(Address)

New York, N.Y. 10123

(City/State and Zip code)

For further information concerning this matter, please call:

Michele Needle

(Name of Person)

at ( 212 ) 244-6650

(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

AND  
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04 MAY 17 AM 10:50  
TALLAHASSEE, FLORIDA

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

April 14, 2004

MICHELE NEEDLE  
NATIONAL COIN EXCHANGE INC.  
450 SEVENTH AVE, 45TH FLOOR  
NEW YORK, NY 10123

SUBJECT: NATIONAL COIN EXCHANGE INC.  
Ref. Number: W04000014406

We have received your document for NATIONAL COIN EXCHANGE INC. and your check(s) totaling \$87.50. 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: 004A00024568

RECEIVED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04 MAY 17 AM 10:50

FILED

**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. National Coin Exchange, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

National Coin Payroll  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New Jersey 3. 22-2059842  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 03-25-74 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. 450 Seventh Ave. 45<sup>th</sup> Floor NY, NY 10123  
(Principal office address)  
450 Seventh Ave. 45<sup>th</sup> Floor NY, NY 10123  
(Current mailing address)

8. Intercompany paymaster used to pay employees of several companies  
(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: Lissette Rivera

Office Address: 1515 N. Flagler Dr., 100-Mgmt. office  
West Palm Beach, Florida 33401  
(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.*

Lissette Rivera  
(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:

AND  
FILED  
MAY 17 4 10:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**A. DIRECTORS**

Chairman: Ivor Braka - Sole Director  
Address: 450 Seventh Ave, 45<sup>th</sup> Floor  
New York, NY 10123

Vice Chairman: \_\_\_\_\_  
Address: \_\_\_\_\_

Director: \_\_\_\_\_  
Address: \_\_\_\_\_

Director: \_\_\_\_\_  
Address: \_\_\_\_\_

**B. OFFICERS**

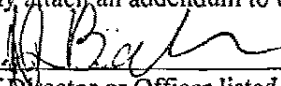
President: Ivor Braka  
Address: 450 Seventh Ave, 45<sup>th</sup> Floor  
New York, NY 10123

Vice President: Treasurer - Benjamin Braka  
Address: 450 Seventh Ave, 45<sup>th</sup> Floor  
New York, NY 10123

Secretary: VP + Secretary - David Braka  
Address: 450 seventh Ave, 45<sup>th</sup> Floor  
Treasurer: New York, NY 10123

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.   
(Signature of Director or Officer listed in number 12 of the application)

14. Ivor Braka - Sole Director  
(Typed or printed name and capacity of person signing application)

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APR  
04 MAY 17 AM 10:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

NATIONAL COIN EXCHANGE, INC.  
6397860000

*I, the Treasurer of the State of New Jersey, do  
hereby certify that the above-named  
New Jersey Domestic Profit Corporation was  
registered by this office on March 25, 1974.*

*As of the date of this certificate, said business  
continues as an active business in good standing  
in the State of New Jersey, and its Annual Reports  
are current.*

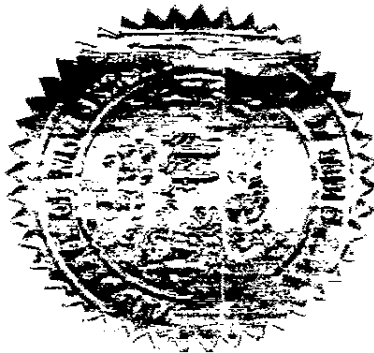
*I further certify that the registered agent and  
registered office are:*

*Kenneth D. Wolfe, Esq.  
Cooper Perskie April Niedelman Wage  
1125 Atlantic Ave., 3rd Fl.  
Atlantic City, NJ 08404*

*Continued on next page . . .*

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

NATIONAL COIN EXCHANGE, INC.



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and  
affixed my Official Seal  
at Trenton, this  
4th day of May, 2004

A handwritten signature in cursive script, reading "John E. McCormac".

John E McCormac, CPA  
State Treasurer