

F04000003423

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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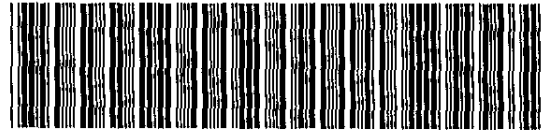
(Business Entity Name)

(Document Number)

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STATE  
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04 JUN 17 PM 12:58

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STATE  
CORPORATIONS  
TALLAHASSEE, FLORIDA

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BK



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 754767 7327491

AUTHORIZATION :

COST LIMIT : \$ PPD

04 JUN 17 PM 12:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : June 16, 2004

ORDER TIME : 9:26 AM

ORDER NO. : 754767-005

CUSTOMER NO: 7327491

CUSTOMER: Don Gensinger, Controller  
Long Island Fireproof Door,  
5 Harbor Park Drive

Port Washington, NY 11050

FOREIGN FILINGS

NAME: LONG ISLAND FIREPROOF DOOR,  
INC.

XXXX QUALIFICATION (TYPE: CQ)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman -- EXT# 2908

EXAMINER: \_\_\_\_\_

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA

04 JUN 87 PM 12:58  
SECRET  
TALLAHASSEE, 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. Long Island Fireproof Door, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. N/A  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
3. New York  
(State or country under the law of which it is incorporated)
4. 11-2126201  
(FEI number, if applicable)
5. 10/11/66  
(Date of incorporation)
6. perpetual  
(Duration: Year corp. will cease to exist or "perpetual")
7. 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.))
8. 5 Harbor Park Drive, Port Washington, NY 11050  
(Principal office address)
9. Same  
(Current mailing address)
10. back office support for NY office.  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
11. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)  
Name: Corporation Service Company  
Office Address: 1201 Hays Street  
Tallahassee, Florida 32301  
(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.

Ann L. Drilling  
(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: \_\_\_\_\_

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

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

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

Director: Vincent Gallo

Address: 21 Pheasant Hill Lane

old Brookville, NY 11545

Director: Joseph Gallo

Address: 237 Harbor Road

Sands Point, NY 11050

**B. OFFICERS**

President: Vincent Gallo

Address: 21 Pheasant Hill Lane

old Brookville, NY 11545

Vice President: Joseph Gallo

Address: 237 Harbor Rd.

Sands Point, NY 11050

Secretary: Joseph Gallo

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

Treasurer: Vincent Gallo

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. Vincent Gallo, President

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

**State of New York** } **ss:**  
**Department of State**

I hereby certify, that the Certificate of Incorporation of LONG ISLAND FIREPROOF DOOR, INC. was filed on 10/11/1966, 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.

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*Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 01st day of June  
two thousand and four.*



*Secretary of State*

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