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## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** REALITY ROOFING 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:

ROBERT SHANNON  
(Name of Person)

REALITY ROOFING INC  
(Firm/Company)

23 ROSELLE ST  
(Address)

Mincola, NY 11501  
(City/State and Zip code)

For further information concerning this matter, please call:

ROBERT SHANNON at (516) 248-6592  
(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

**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. REALITY ROOFING INC.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. NEW YORK 3. 11-336 7356  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 1/16/1997 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. N/A  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 23 ROSELLE ST. Mineola NY 11501  
(Principal office address)

23 ROSELLE ST. Mineola NY 11501  
(Current mailing address)

8. ANY LAWFUL ACT  
(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 NOT acceptable)

Name: ROBERT SHANNON

Office Address: 886 S.W. BILTMORE ST

PORT ST. LUCIE, Florida 34952  
(City) (Zip code)

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**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.*

Robert Shannon  
(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: ROBERT SHANNON

Address: 228 CLEMENS RD  
mineola, NY 11501

Vice Chairman: CHRISTINA CABRERA

Address: 35 HAWTHORN ST  
Williston Park, NY 11596

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

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

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

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

**B. OFFICERS**

President: ROBERT SHANNON

Address: 228 CLEMENS RD  
mineola, NY 11501

Vice President: \_\_\_\_\_

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

Secretary: CHRISTINA CABRERA

Address: 35 HAWTHORN ST. Williston Park, NY 11501

Treasurer: \_\_\_\_\_

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

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

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

14. ROBERT SHANNON, 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 REALITY ROOFING INC. was filed on 01/16/1997, 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 24th day of November  
two thousand and four.*

A handwritten signature in black ink, appearing to read "R. A. DeS..." with a stylized flourish at the end.

*Secretary of State*

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