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### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 4, 2005

ROBERT MACDONALD 300 PARK AVENUE, SUITE 1700 NEW YORK, NY 10022

SUBJECT: COMED SOLUTIONS INCORPORATED

Ref. Number: W05000011400

We have received your document for COMED SOLUTIONS INCORPORATED and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence, which usually consists of a single sheet of paper and clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence from the same office that provided you with the certified copy.

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) 245-6020.

Tammi Cline Document Specialist

Letter Number: 305A00015222

## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Comed Solutions incorporated
(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 Macdonald
(Name of Person)
IBD Corporation
(Firm/Company)
300 Park Avenue, Suite 1700
(Address)
New York, NY 10022
(City/State and Zip code)
For further information concerning this matter, please call:  Robert Macdonald  (Name of Person)  (Area Code & Daytime Telephone Number)  ARR  (Robert Macdonald  (Area Code & Daytime Telephone Number)
Robert Macdonald at (212 ) 307 7610
(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 Certificate of Status □ \$78.75 Filing Fee Certified Copy □ \$87.50 Filing Fee, Certified Copy □ \$87.50 Filing Fee, Certified Copy □ \$87.50 Filing Fee, 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.	Comed Solution	ns Incorporated						
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")						ं क्षा -	
	Comed	Comed						
	(If name unavaila	name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)						
2.	Delaware		3.	01-0830145				
(	(State or country	under the law of which it is incorporated)	-	(FEI number, if applicable)	•	<u>-</u>		
4.	March 1, 2005		5.	Perpetual				
		of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")	7			
6.	not yet							
				n Florida, if prior to registration)	•	1 1-4	<del>.</del> .	
		•		502, F.S., to determine penalty liability)				
7	300 Park Avenu	00 Park Avenue, Suite 1700, New York, NY 10022 (c/o Robert Macdonald)						
	(Principal office address)						•	
-		(Current mailing	add	ress)	ſ	H& *	٠, -	
8.	Registering in F	Florida in order to set up bank account.	C	ompany purpose: construction mediation	SECIN	2005 <b>k</b>		
	(Purpose(s	) of corporation authorized in home state of	rc	ountry to be carried out in state of Florida)	>	F.	~T3	
9.	Name and stree	t address of Florida registered agent: (	P.C	D. Box NOT acceptable)	RY 0	MAR -8		
	Name:	D. Lee Harper			S)	PH	<b>J</b>	
Οfi	fice Address:	1920 Michigan Avenue		ORIDA ——	TAT:	ઃ 22		
		Miami Beach		, Florida 33140		. 🗸		
		(City)		(Zîp code)		· * :=		
10.	. Registered as	gent's acceptance:						
		•	, presi	ce of process for the above stated corneration at the	Jac	0		

namea as registerea 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.

(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	n: Norman Nelson	· <del>····································</del>		<u> </u>			
Address:	c/o 300 Park Avenue, Suite 1700, NY, NY 10022		· -	· .		· 	
Vice Cha	irman: n/a		,				• • •
Address:	•						
12000000		······································		<del></del>	<del></del>		
Director:	Kimbery Snyder						;-
Address:	c/o 300 Park Avenue, Suite 1700, NY, NY 10022	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·				7"
						<del></del>	
Director:	R. Fulton Macdonald					<del></del>	
Address:	c/o 300 Park Avenue, Suite 1700, NY, NY 10022		<u> </u>	·		· .	
		<del></del>	····			ii	
B. OFF	ICERS	g e verr	- 1 <del></del>	•	ECR	905 H	
President	R. Fulton Macdonald	- Target			HAS	MAR	
Address:	300 Park Avenue, Suite 1700, New York, NY 10022			····	m-≺ m <sub>Q</sub>	- <del>(</del>	
			_ <del>_</del>	·-	- F.S.	3	0
Vice Pres	ident:			· ·	RATE OF THE PROPERTY OF THE PR	3: 22	
Address:			<del></del>				·
	Kimbarin Canalar	<del></del>	<del></del>	<del></del>			·
Secretary:	Kimberly Snyder	<del> </del>	<del></del>			<del></del>	is upper
Address:	300 Park Avenue, Suite 1700, NY, NY 10022						
Treasurer	Kimberly Snyder		<u> </u>				•
Address:	300 Park Avenue, Suite 1700, NY, NY 10022				1	- L	
				•			
NOTE:	If necessary, you may attach an addendum to the application	on listing addition	onal officer	s and/or di	irectors.		
13	of Tura Wacx	m//>					
<b></b> _	(Signature of Director of Officer listed in nun	ider 12 of the a	pptication)				
14. H. F	ulton Macdonald, President (Typed or printed name and capacity of per-	on doning	liontical		<del></del>		_
	(1) year or primed name and capacity of per-	son signing app	ncanon)				~

PAGE 1

# Delaware

## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COMED SOLUTIONS INCORPORATED" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTH DAY OF MARCH, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF

DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE

EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE

RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT

BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COMED SOLUTIONS INCORPORATED" WAS INCORPORATED ON THE FIRST DAY OF MARCH, A.D. 2005.

Flarriet Smith Windson Secretary of State

AUTHENTICATION: 3724447

DATE: 03-07-05

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