

F0500004051

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

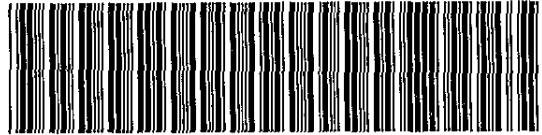
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DATE: 07-14-05

NAME: ORGANIZE LONG ISLAND, INC

TYPE OF FILING: APPLICATION TO TRANSACT BUSINESS

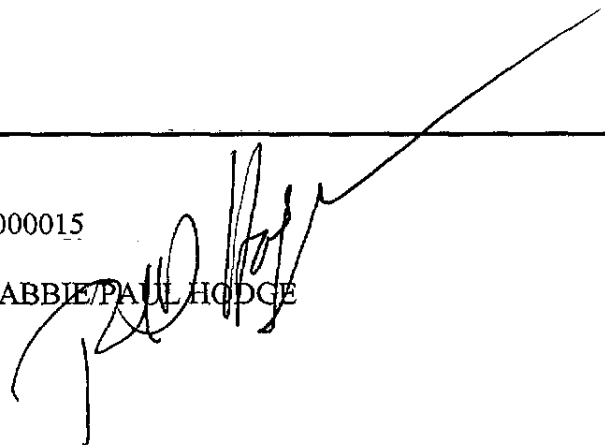
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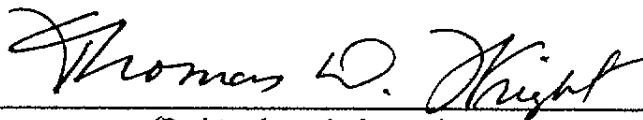
**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

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. ORGANIZE LONG ISLAND, INC.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- ORGANIZE LONG ISLAND OF FLORIDA, INC.  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. NEW YORK 3. 02-0603610  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. MAY 10, 2002 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUALIFICATION  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 66 DAVISON LANE EAST WEST ISLIP, NY, 11795  
(Principal office address)
- 66 DAVISON LANE EAST WEST ISLIP, NY, 11795  
(Current mailing address)
8. PROFESSIONAL ORGANIZATION BUSINESS IN FLORIDA.  
(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: THOMAS D. WRIGHT
- Office Address: 9711 OVERSEAS HIGHWAY
- MARATHON, Florida 33050  
(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.*



(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:

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**A. DIRECTORS**

Chairman: ALICE S. PRICE

Address: 66 DAVISON LANE EAST  
WEST ISLIP, NY 11795

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

**B. OFFICERS**

President: ALICE S. PRICE

Address: 66 DAVISON LANE EAST  
WEST ISLIP, NY 11795

Vice President:

Address:

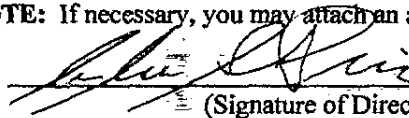
Secretary: ALICE S. PRICE

Address: 66 DAVISON LANE EAST WEST ISLIP, NY 11795

Treasurer:

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)

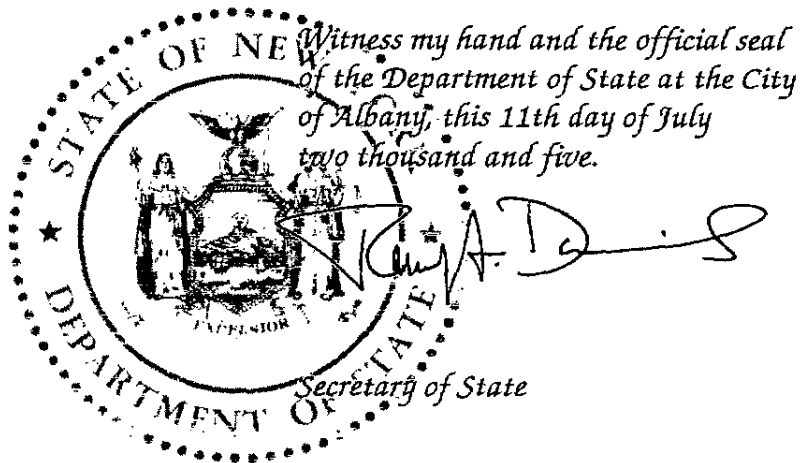
14. ALICE S. PRICE  
(Typed or printed name and capacity of person signing application)

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

I hereby certify, that the Certificate of Incorporation of ORGANIZE LONG ISLAND INC. was filed on 05/10/2002, under the name of ASPPO INC., 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 an existing corporation.

A Certificate of Amendment ASPPO INC., changing its name to ORGANIZE LONG ISLAND INC., was filed 07/16/2003.

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