# 105000000584/

•	the form	1
	CECRETARY U	TE TANDA
(Requestor's Name)	FILLMIN TOLL	`
(Address)		1
(Address)		
(Address)		
(City/State/Zip/Phone	#)	
PICK-UP WAIT	MAIL MAIL	
(Business Entity Name	e)	
(Document Number)		
Certified Copies Certificates of	of Status	
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### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

FILED

2005 OCT -3 - 3: 41

SECRETARY OF STATE
TALLAHASSEF, FLORIDA

September 22, 2005

MARK MARIN 559 SW ST. MARTIN'S COVE PORT ST. LUCIE, FL 34986-3407

SUBJECT: LEXYTECH CONSULTING CORP.

Ref. Number: W05000044076

We have received your document for LEXYTECH CONSULTING CORP. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

The registered agent must sign accepting the designation.

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) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 805A00058095

#### TRANSMITTAL LETTER FILED

то:	Registration Section Division of Corporations			1412 UCI -3 ₽ 3: 4;
SUBJ	ECT:	LEXYTECH	CONSULTING CORP	· yate de may de state.
		(Name of corpor	ation - must include su	
Dear S	ir or Madam:			
"Certif				ransact Business in Florida," eferenced foreign corporation to
Please	return all correspondence co	ncerning this ma	tter to the following:	
		MAR	RK MARIN	
		(Nam	e of Person)	
		LEXYTECH CO	ONSULTING CORP.	
		(Firm	/Company)	
		559 SW ST. N	MARTIN'S COVE	
		(A	address)	
		PORT ST. LUC	IE, FLORIDA 34986-3	407
		(City/Sta	ate and Zip code)	
For fur	ther information concerning	this matter, plea	se call:	
	MARK MARIN	at ( 77	2 621-8145	
	(Name of Person)		ea Code & Daytime To	elephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399  MAILING ADDRESS: Registration Section Division of Corporations Pivision of Corporations P.O. Box 6327 Tallahassee, FL 32314				
	·			•
Enclose	ed is a check for the following	g amount:		
<b>Ø</b> \$70.		Filing Fee & icate of Status	☐ \$78.75 Filing Fee Certified Copy	& S87.50 Filing Fec, 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. THE LEXYTER	CH CORPORATION				<u> 2005 001 - 1</u>	3 <u>P 3:</u> 41
	corporation; must include "INCORPORAT Corp," "Inc," "Co," or "Corp.")	ED,	" "COMPA	NY," "CORPOR	ATION," LEGIZIAR TALLATAGE	Y OF STATE SEE, FLORIDA
			1.416			
(If name unavail	lable in Florida, enter alternate corporate na				nsacting business	m Florida)
2. NEW YORK		_	11-358833		· •	<u> </u>
(State or country	under the law of which it is incorporated)			(FEI number,	, if applicable)	
4. FEBRUARY 1	4TH 2001	5.	PERPETU			· · · · · · · · · · · · · · · · · · ·
(Date	e of incorporation)		(Duration:	Year corp. will c	cease to exist or "p	erpetual")
6, NONE	<del>-</del>				-	
	(Date first transacted busine (SEE SECTIONS 607.1501 & 60					
- FEO CIM ST M	ARTINS COVE, PORT ST. LUCIE, FL	OB!	DA 34086	3407		
7.009 GW G1.100	(Principal office					-
500 -111 OF 14				0.407		
559 SW ST. M	ARTINS COVE, PORT ST. LUCIE, FL (Current mailing			3407		<u></u>
	(outon maning	,	,			
. SALES/SERVI	CE CONSULTING					
~	s) of corporation authorized in home state	or co	ountry to be	carried out in state	e of Florida)	
O. Name and atra	et address of Florida registered agent:	æε	) Boy NO	T acceptable)		
9, Ivallie and suc	et audiess of Piorida registered agent.	(1.0	7. DOX <u>110</u>	<u>r</u> acceptaole)		
Name:	MARK MARIN		<del></del>			
Office Address:	559 SW ST. MARTINS COVE	<u>,</u>				
	PORT ST. LUCIE		Flor	ida 34986-3407		
	(City)		, , 1 101.	(Zip code)		
	gent's acceptance: ned as registered agent and to accept s		ce of neoce	ee for the ahous	statač cornorati	ion at the place
	rea as registerea agent and to accept s application, I hereby accept the appo					
further agree to o	comply with the provisions of all statut	tes r	elative to th	te proper and co		
and I am familia	r with and accept the obligations of m	y po	sition as re	gistered agent.		
	11 bout			. —	_	
	Width of					
	(Registered agent's signat	ure)				
	certificate of existence duly authentica					
the Department of	f State, by the Secretary of State or other	er of	fficial havir	ig custody of co	rporate records is	n the jurisdiction

under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

#### A. DIRECTORS

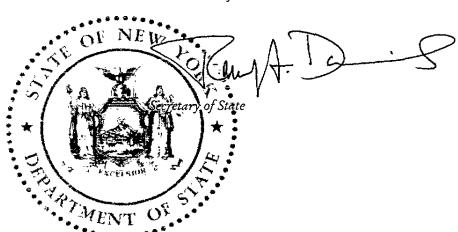
Chairman:	
Address:	· ILED
	:05 007 -3 P 3-41
	SEGAL BARY DE STATE
Address:	TALLA.III.CSEE. FLORIDA
Director:	
Address:	
— Director:	
Address:	
B. OFFIC	ERS
President: <u>M</u>	MARK MARIN
Address: 5	59 SW ST. MARTINS COVE
P	PORT ST. LUCIE, FLORIDA 34986-3407
Vice Preside	nt:
Address:	
 Secretary: _	
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. PRESI	

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

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

I hereby certify, that the Certificate of Incorporation of LEXYTECH CONSULTING CORP. was filed on 02/14/2001, 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.

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 29th day of August two thousand and five.



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