

F05000006210

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

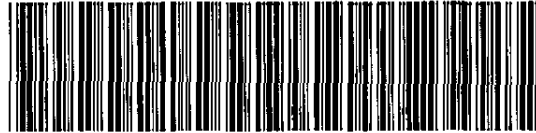
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SEAL OF THE STATE
TALLAHASSEE, FLORIDA

60011-012000



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 667680 7192937

AUTHORIZATION

Patricia Pappas

COST LIMIT : \$ 87.50

05 OCT 25 PM 2:31
FILED
TALLAHASSEE, FLORIDA

ORDER DATE : October 24, 2005

ORDER TIME : 10:38 AM

ORDER NO. : 667680-005

CUSTOMER NO: 7192937

FOREIGN FILINGS

NAME: CFOS. INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan -- EXT# 2955

EXAMINER: _____

**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. CFOS, 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. Delaware

(State or country under the law of which it is incorporated)

3. 20-3599091

(FEI number, if applicable)

4. October 4, 2005

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. October 17, 2005

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

7. 9310 Old Kings Road South, Building 201, Jacksonville, FL 32257

(Principal office address)

888 Veterans Memorial Drive, Suite 440, Hauppauge, NY 11788

(Current mailing address)

8. To engage in any lawful act or activity for which corporations may be organized.

(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: 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.

Corporation Service Company

By: 

(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: Joseph V. Amella
Address: 888 Veterans Memorial Highway, Suite 440
Hauppauge, NY 11788

Vice Chairman: _____
Address: _____

Director: Mike G. Reinecke
Address: 31 Lake Mist Drive
Sugar Land, TX 77479

Director: Michael J. Golde
Address: 888 Veterans Memorial Highway, Suite 440
Hauppauge, NY 11788

B. OFFICERS

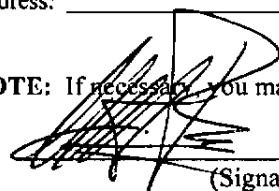
President: Joseph V. Amella
Address: 888 Veterans Memorial Highway, Suite 440
Hauppauge, NY 11788

Vice President: Mike G. Reinecke
Address: 31 Lake Mist Drive
Sugar Land, TX 77479

Secretary: Mike G. Reinecke
Address: 31 Lake Mist Drive, Sugar Land, TX 77479

Treasurer: Michael J. Golde
Address: 888 Veterans Memorial Highway, Suite 440, Hauppauge, NY 11788

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. Mike G. Reinecke, Vice President
(Typed or printed name and capacity of person signing application)

Delaware

PAGE 1

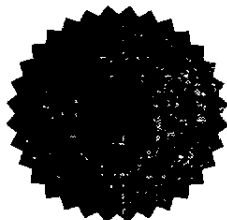
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CFOS, INC." 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 TWENTY-FOURTH DAY OF OCTOBER, 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 SAID "CFOS, INC." WAS INCORPORATED ON THE FOURTH DAY OF OCTOBER, A.D. 2005.

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.



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

4040459 8300

AUTHENTICATION: 4246256

050865609

DATE: 10-24-05