# F05000006339

| (Requestor's Name)                      |
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| (Address)                               |
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| (Address)                               |
| ·                                       |
| (City/State/Zip/Phone #)                |
| (Orthoddiziph None #)                   |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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

October 19, 2005

STEVEN WASSERSTROM IAMINDEPENDENT.COM, INC. PO BOX 187 TENAFLY, NJ 07670

SUBJECT: IAMINDEPENDENT.COM, INC.

Ref. Number: W05000047874

We have received your document for IAMINDEPENDENT.COM, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$2,300.00.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Document Specialist .

Letter Number: 905A00063701

Manual Street Programme 131 PM 3: 15



PO Box 187 Tenafly, NJ 07670-9998

Phone 201.567.2434 Tall Free 866.778.2434 509.756.1156 www.iamindependent.com

October 27, 2005

Mr. Joey Bryan Document Specialist Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314



#### Dear Mr Bryan:

Confirming our phone conversation, and in response to your letter dated October 19, 2005, iamindendent.com, Inc. registered with the State of Florida Unemployment in February, 2003. We do not transact business or conduct affairs in Florida. We have employees domiciled in Florida and working in other states.

We would appreciate your having the \$2,300 penalty fee rescinded and continue with the registration process.

Sincerely.

Certificate of Acknowledgment

Steven Wasserstrom

President

iamindependent.com,inc.

State of New Jersey County of Bergen

On October 28, 2005, I, Susan Nesbit-Peterson, Notary Public in and for said county, personally appeared, Steven Wassesstrom and who has

Adenthfiled himself to

Notary Public of New Jersey

### **COVER LETTER**

| TO: Registration Section Division of Corporations  |  |  |
|--|--|--|
| SUBJECT: /AHINDEDENDENT: Com, Inc. (Name of corporation - must include suffix)   |  |  |
| (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:  |  |  |
| STEVEN WASSERS TRAM (Name of Person)  EST W  |  |  |
| (Name of Person)   |  |  |
| IAMINOEDENDENT. Com, Inc   |  |  |
| PAMINOFPENDENT. Com, Inc. (Firm/Company)   |  |  |
| P.O. Box 187   |  |  |
| (Address)  |  |  |
| TENAFLY NJ 07670 (City/State and Zip code)   |  |  |
| (City/State and Zip code)  |  |  |
| For further information concerning this matter, please call:  STEVEN WASSESSESS at (201) 5672434  (Name of Person) (Area Code & Daytime Telephone Number)  |  |  |
| (Name of Person) (Area Code & Daytime Telephone Number)  |  |  |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building P.O. Box 6327 Pallahassee, FL 32301  Enclosed is a check for the following amount:   |  |  |
| \$70.00 Filing Fee \$\Boxed{\sigma} \$78.75 Filing Fee & \$\Boxed{\sigma} \$78.75 Filing Fee & \$\Boxed{\certificate of Status}\$\$\$ Certified Copy \$87.50 Filing Fee, \$\$ Certified Copy   |  |  |

## STATEMENT CONCERNING AUTHORITY TO TRANSACT BUSINESS IN FLORIDA BY A FOREIGN CORPORATION

Name: IAMINDEPENDENT.COM INC

The above referenced corporation is not presently transacting business in Florida within the meaning of s. 607.1501 or 617.1501, Florida Statutes, and is not required to receive a certificate of authority to transact business in Florida.

(Signature of Officer/Director)

(Date)

(Typed or Printed Name of Person Signing Above)

(Title)

Name: IAMINDEPENDENT.COM INC

FEI #: 22-3768595

FILED 2016 OCT 31 PH 3: 16

OUNT OF CORPORATIONS

OUNT OF CORPORATIONS

## 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. | MAMINOE PENDENTICOM, 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. | (State or country under the law of which it is incorporated)  3. 23-3768591  (FEI number, if applicable)                    |
|    | (State or country under the law of which it is incorporated) (FEI number, if applicable)                                    |
| 4. | (Date of incorporation)  5. (Duration: Year corp. will cease to exist or "perpetual")                                       |
|    | (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")   |
| 6. | 2/1/2003  |
|    | (Date first transacted business in Florida, if prior to registration)   |
|    | (SEE SECTIONS 607.1301 & 607.1302, F.S., to determine penalty liability)  |
| 7. | P.O. Box 187 TENATY NJ 07670  (Current mailing address)   |
|    | (Principal office address)  |
|    | 1.0. Box 187 TENARY NJ 07670 55 3   |
|    | (Current mailing address)   |
|    |   |
| 8. | Porsultant live in Fla-but work autside Blate   |
|    | (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)                       |
| ^  | Name and street address of Florida and Association (R.O. Day NOT association)   |
| 7. | Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  |
|    | Name: WASSERSTROM   |
| 0. | ffice Address: 4621 HOLLYWOOD BLVD  |
|    | Howyword , Florida 330 >1   |
|    | (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.

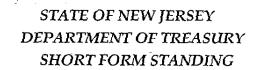
(Registered agent's signature)

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: A. DIRECTORS Chairman: \_\_ Address: Vice Chairman: Address: Director: Address: Director: Address: \_ **B. OFFICERS** Vice President: Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

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

(Signature of Director or Officer listed in number 12 of the application)



IAMINDEPENDENT.COM, INC. 0100836213

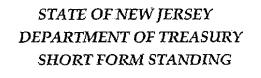
I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on December 7, 2000.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Nathan G Fink Esq 470 New Milford Ave Oradell, NJ 07649 0000

Continued on next page . . .



IAMINDEPENDENT.COM, INC.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 4th day of October, 2005

Johntheleman

John E McCormac, CPA State Treasurer

