

FDS000007356

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

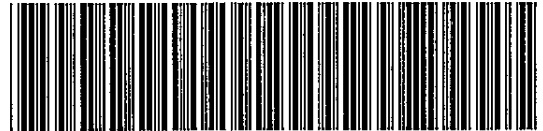
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800062248208

12/19/05--01095--020 **87.50

2005 DEC 19 PM 12:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

FDS-7356
GR

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Family Equity Solutions, Inc.
(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:

STUART HOBOWITZ
(Name of Person)

FAMILY EQUITY SOLUTIONS, INC.
(Firm/Company)

33 Willis Avenue Suite 102
(Address)

mineola NY 11501
(City/State and Zip code)

For further information concerning this matter, please call:

STUART HOBOWITZ at (516) 746-7682
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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 ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

2005 DEC 19 PM 12:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**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. Family Equity Solutions, 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. New York 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 08/16/2004 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 33 Willis Avenue Suite 102 Mineola NY 11501
(Principal office address)
33 Willis Avenue Suite 102 Mineola NY 11501
(Current mailing address)

8. Real Estate Finance
(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)

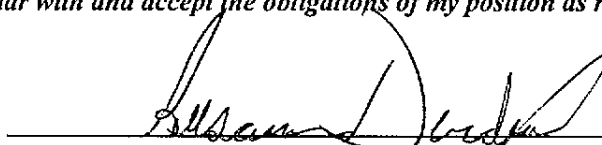
Name: PD Trucking, Inc.

Office Address: 1624 Twin Lake Drive

Gotha, FL 34734, Florida 34734
(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:

FILED
DEC 19 PM 12:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. DIRECTORS

Chairman: STUART HOBOWITZ

Address: 33 WILPS Avenue suite 102 Mineola Ny 11501

Vice Chairman: Stuart Horowitz

Address: 33 WILPS Avenue suite 102 Mineola Ny 11501

Director: Stuart Horowitz

Address: 33 WILPS Avenue Mineola Ny 11501 suite 102

Director: STUART HOROWITZ

Address: 33 WILPS Avenue Mineola Ny 11501 suite 102

B. OFFICERS

President: STUART HOROWITZ

Address: 33 WILPS Avenue Mineola Ny 11501 suite 102

Vice President: STUART HOROWITZ

Address: 33 WILPS Avenue Mineola Ny 11501 suite 102

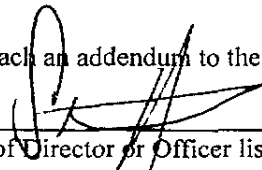
Secretary: STUART HOROWITZ

Address: 33 WILPS Avenue Mineola Ny 11501 suite 102

Treasurer: STUART HOROWITZ

Address: 33 WILPS Avenue Mineola Ny 11501 suite 102

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. Stuart Horowitz president
(Typed or printed name and capacity of person signing application)

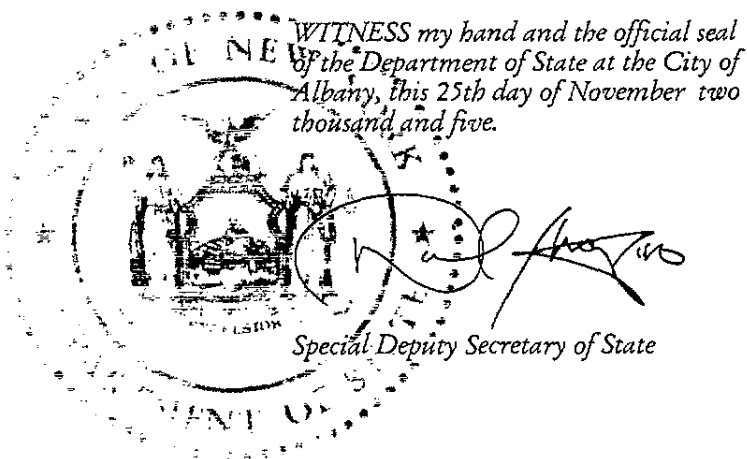
2005 DEC 19 PM 12:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of FAMILY EQUITY SOLUTIONS INC. was filed on 08/16/2004, under the name of FAMILY FUNDING, 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 FAMILY FUNDING, INC., changing its name to FAMILY EQUITY SOLUTIONS INC., was filed 08/31/2004.



200511280442 63