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TRANSMITTAL LETTER

FILED

TO: Registration Section
Division of Corporations

JUN 24 P 12:31

SUBJECT: Allied Construction Management, 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:

Mary Fabean
(Name of Person)
Allied Construction Inc
(Firm/Company)
P.O. Box 1646, 1715 Hwy 34
(Address)
Wall, New Jersey 07719
(City/State and Zip code)

For further information concerning this matter, please call:

Mary Fabean at (732) 751 2522
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

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2005 JUL 24 PM 12:31

RECEIVED
TALLAHASSEE, FLORIDA

July 11, 2005

ROBERT SMITH
1715 HIGHWAY 34
WALL, NJ 07719

SUBJECT: ALLIED CONSTRUCTION MANAGEMENT INC.
Ref. Number: W05000016439

We have received your document for ALLIED CONSTRUCTION MANAGEMENT INC.. However, the document has not been filed and is being returned for the following:

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 205A00045654



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

FILED

2005 JUN 24 P 12:31

SECRET
TALLAHASSEE, FLORIDA

August 10, 2005

ROBERT SMITH
ALLIED CONSTRUCTION MANAGEMENT INC.
P.O. BOX 1646
WALL, NJ 07719

SUBJECT: ALLIED CONSTRUCTION MANAGEMENT INC.
Ref. Number: W05000016439

We have received your document for ALLIED CONSTRUCTION MANAGEMENT INC.. However, the document has not been filed and is being returned for the following:

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 205A00045654

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AUG 15 2005

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

January 12, 2006

FILED

2006 JAN 24 PM 12:31

SEC. OF STATE
TALLAHASSEE, FLORIDA

Attention:
Agnes Lunt – Document Specialist

I have mailed to you the completed page of the "Application by Foreign Corporation for Authorization To Transact Business In Florida, showing our registered agent with signature. I have included your response letter to our initial application submission dated August 10th, 2005 for your reference. If there is anything wrong with this application or anything else I must do please call me at (732) 751-2522.

Thank You

Kevin Dean
Allied Construction Management, Inc.
P.O. Box 1646
Wall, NJ 07719

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. Allied Construction Management INC
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")
2. NEW JERSEY
(State or country under the law of which it is incorporated)
3. 22-3558617
(FEI number, if applicable)
4. JANUARY 16th, 1998
(Date of incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 1715 Highway 34 South, UNIT 1, FARMINGDALE, NJ 07719
(Principal office address)
P.O. Box 1646, 1715 HWY 34, WALL, NJ 07719
(Current mailing address)
8. HOTEL RENOVATIONS
(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: NRAT Services, Inc.
Office Address: 2731 Executive Park Dr., Suite 4
Weston, Florida 33331
(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.
NRAT Services, Inc.
By: Christian Eubank 1-11-2006
(Registered agent's signature)
Christian Eubank, Asst. Secretary
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:
ROBERT R. SMITH
President
Allied Construction Management INC.
P.O. Box 1646
WALL, NJ 07719

A. DIRECTORS

Chairman: Robert P. Smith
Address: 1715 Hwy 34, P.O. Box 1646
Wall NJ 07719

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TALLAHASSEE, FLORIDA

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Robert P. Smith
Address: 1715 Hwy 34, P.O. Box 1646
Wall, NJ 07719

Vice President: _____

Address: _____

Secretary: _____

Address: _____

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. _____

Robert P. Smith
(Typed or printed name and capacity of person signing application)

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

ALLIED CONSTRUCTION MANAGEMENT, INC.
0100732289

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 January 16, 1998.

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:

K M Schwarz Jr
35 Colby Ave
Manasquan, NJ 08736

Continued on next page . . .

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

ALLIED CONSTRUCTION MANAGEMENT, INC.



IN TESTIMONY WHEREOF, I have
hereunto set my hand and
affixed my Official Seal
at Trenton, this
10th day of June, 2005

A handwritten signature in cursive script, appearing to read "John E. McCormac".

John E McCormac, CPA
State Treasurer