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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CALEND & IACOI, LTD. D/B/A CALEND & IACOI, 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:

BETHANY A. NORRIS  
(Name of Person)

PARALEGAL RESOURCES, INC.  
(Firm/Company)

37 THURBER BOULEVARD, SUITE 107  
(Address)

SMITHFIELD, RI 02917  
(City/State and Zip code)

For further information concerning this matter, please call:

BETHANY A. NORRIS at ( 401 ) 349-4510  
(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

**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. CALENDA & IACOI, LTD.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

CALENDA & IACOI INC.  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. RHODE ISLAND 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. JULY 28, 1994 5. PERPETUAL  
(Date of incorporation) (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. 6801 Lake Worth Road Suite 325, Lake Worth, FL 33467  
(Principal office address)

same as above  
(Current mailing address)

8. TO ENGAGE IN THE PRACTICE OF LAW.  
(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)

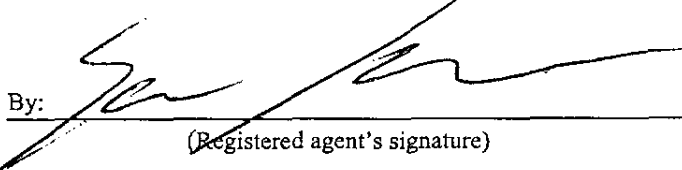
Name: Sean I. Koplow c/o American Abstract Assoc.

Office Address: 6801 Lake Worth Road Suite 325

Lake Worth, Florida 33467  
(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.*

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: NONE

06 JAN 25 PM 4:29

Address: \_\_\_\_\_

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: DANIEL A. CALEDA

Address: 171 BROADWAY

PROVIDENCE, RI 02903

Vice President: JAMES A. IACOI

Address: 171 BROADWAY

PROVIDENCE, RI 02903

Secretary: DANIEL A. CALEDA

Address: 171 BROADWAY, PROVIDENCE, RI 02903

Treasurer: JAMES A. IACOI

Address: 171 BROADWAY, PROVIDENCE, RI 02903

**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. JAMES A. IACOI VICE PRESIDENT

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



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
*Office of the Secretary of State*

**Matthew A. Brown**  
*Secretary of State*

06 JAN 25 PM 1:30  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

*The Office of the Secretary of State of the State of Rhode Island and Providence Plantations, HEREBY CERTIFIES, that*

***Calenda & Iacoi, Ltd.***

*a Rhode Island corporation, filed articles of incorporation in this office on the 28<sup>th</sup> day of July, 1994; and*

*IT IS FURTHER CERTIFIED that as of this date said corporation is duly organized and existing under and by virtue of the laws of the State of Rhode Island and is in good standing according to the records of this office.*

SIGNED AND SEALED this tenth  
day of January, A.D. 2006.

*Matthew Brown*

*Secretary of State*

BY *Debra Antonelli*

