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## Florida Department of State

Division of Corporations Public Access System

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# 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.

"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")			"CORPORATION,"	
(If name unavailable in Florida, enter alternate corporate na	me adopte	ed for the ou	roose of transacting but	iness in Florida)
Tieferware	3. applie			,
(State or country under the law of which it is incorporated)	3. жррц		El number, if applicab	e)
nain196	: Descri			·,
(Date of incorporation)	5. Ferp	etlon: Vou	corp. will cease to exis	t or "perhebus?")
	(1000	auom. vem	Colp. Wat occasion of the	
Upon qualification (Date first transacted business	ITlani	de deselon	to seeletration)	
(SEE SECTIONS 607.1501 & 60				
7, 383 Madison Avenus, New York, New York 10179			•	
(Principal office	adotess)			
383 Madison Avenue, New York, New York 10179	:			-
(Current restiling	address)			
Sec Attached				
<b>D.</b>				
(Purpose(s) of corporation authorized in home state of	or country	to be carrie	d out in state of Florida	)
				)
Name and street address of Florida registered agent: (     CT Connection System				)
Name and <u>street address</u> of Florida registered agent: (	(P.O. Bo			)
Name and street address of Florida registered agent: (	(P.O. Bo			)
Name and street address of Florida registered agent: (	(P.O. Bo	x <u>NOT</u> aca	eptable)	
9. Name and <u>street address</u> of Florida registered agent: (  Name: CT Corporation System  Office Address: 1200 South Pine Island Road	(P.O. Bo		ceptable)	
9. Name and street address of Florida registered agent:    Name:   CT Corporation System	(P.O. Bo	x <u>NOT</u> aca	eptable)	
9. Name and street address of Florida registered agent:    Name	(P.O. Bo	x <u>NOT</u> aca , Plorida _	33324 (Zip code)	
9. Name and street address of Florida registered agent:    Name:   CT Corporation System	(P.O. Bo	NOT acc	33324 (Zip code)  The above stated con	rporation at the place
9. Name and street address of Florida registered agent: 6  Name: CT Coxporation System  1200 South Pine Island Road  (City)  10. Registered agent's acceptance:  Having been named as registered agent and to accept statignated in this application, I hereby accept the appointmentar agree to comply with the provisions of all statut	ervice of	NOT acc	33324 (Zip code)  T the above stated color agent and agree to complete per	rporation at the place o met in this capacity. I
9. Name and street address of Florida registered agent: (  Name: CT Coxporation System  1200 South Pine Island Road  (City)  10. Registered agent's acceptance:  Having been named as registered agent and to accept the appo	ervice of	NOT acc	33324 (Zip code)  T the above stated color agent and agree to complete per	rporation at the place o met in this capacity. I
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9. Name and street address of Florida registered agent:  Office Address:  1200 South Pine Island Road  (City)  10. Registered agent's acceptance:  Having been named as registered agent and to accept the appointment of the provisions of all status and I am familiar with and accept the obligations of my Ariene Bernal Assistant Secretary of the Registered Assistant Secretary	ervice of interest es relative positions	NOT acc.  Plorida  Process for as register we to the process as register.	33324 (Zip code)  T the above stated color agent and agree to oper and complete parted agent.	rporation at the place o met in this capacity. I
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Name and street address of Florida registered agent:  Office Address:  1200 South Pine Island Road  (City)  10. Registered agent's acceptance:  Having been named as registered agent and to accept she designated in this application, I havely accept the appointment agree to comply with the provisions of all status and I am familiar with and accept the obligations of my Ariene Bernal Assistant Secretary of By:	ervice of interest expelation of CT Co	NOT acc  NOT acc  Process for process for the	33324 (Zip code)  The above stated cond agent and agree to coper and complete period agent.  Stem	rporation at the place  act in this capacity. I  reformance of my duties  -

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12. Names and business addresses of officers and/or directors;

## Purpose Clause

The purpose for which the corporation is qualified is to engage in any lawful act or activity for which corporations may be qualified under Florida statute no. 607-1503.

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n to the application listing additional officers:	and/or directors.
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nd capacity of person signing application)	
	n to the spirituation liming additional officers:

#### **Directors and Officers**

#### Directors:

Paul M. Friedman John M. Garzone

Officers

Title

Thomas F. Marano

Chief Executive Officer

John M. Garzone

President

Paul M. Friedman

Senior Vice President

Marc Toscano

Secretary

Jeffrey M. Farber

Controller

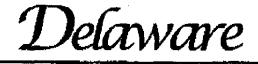
Robert Janukowicz Joseph T. Jurkowski

Tax Director Assistant Secretary

Jr.

All of the above directors and officers are at the following business address:

383 Madison Avenue, New York, New York 10179



## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAMARE, DO HEREBY CERTIFY "PPTS LD CORP." IS DULY INCORPORATED UNDER THE LAME 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 THEATY-FOURTH DAY OF APRIL, A.D. 2006.

4146348 8300 060374113

Harriot Smith Windson, Secretary of State: AUTHENTICATION: 4687567

DATE: 04-24-06