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COVER LETTER

TO: New Filing Section Division of Corporations SUBJECT: Alan 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:				
Susan Leonard				
(Name of Person)				
Alan Gray investigative Services, inc. (Firm/Company)				
88 Broad Street				
(Address)				
(100stgo_ma_02110				
(City/State and Zip code)				
For further information concerning this matter, please call:				
Supan Leanand at (417) 598-1527				
(Name of Person) (Area Code & Daytime Telephone Number)				
STREET/COURIER ADDRESS: MAILING ADDRESS: New Filing Section New Filing Section				
Division of Corporations Division of Corporations Division of Corporations				
Clifton Building P.O. Box 6327				
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301				
Enclosed is a check for the following amount:				
\$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & \$87.50 Filing Fee, Certificate of Status Certified Copy 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.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc," "Co," or "Corp.")	•	•	
man, con, con, co. conpr.)			
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business	in Florida)	,	
2. New York (State or country under the law of which it is incorporated) 3. OU - 346 99 41 (FEI number, if applicable)			
_ ·			
4. APril 7, 1999 5. Continuous (Duration: Year corp. will cease to exist or "p	perpetual")		
6. N/X			
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)			
7. 9 East 40th Street, Ny, Ny 100110 (Principal office address)			
- 88 Broad street Poston, ma, 021	10		
(Current mailing address)			
8. Investigate and adjust property and Cocual to (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	ty Ch	•	5
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)		NAM 90	
Name: NRAI Services INC.	ELIKA HASS	17 12	三
Office Address: 2731 Executive Park on, Suite 4		₽¥	FILED
(City), Florida 3333 (Zip code)	STATE LORID/	6: 38	
10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation designated in this application. I hereby accept the appointment as registered agent and agree to act in			

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:	FILEU
A. DIRECTORS	06 MAY 12 PM 6:38
	APROFITARY OF STATE.
Chairman:	·, 164 B
Address:	
Yilas Chairman	
Vice Chairman:	
Address:	
Director: Day on Boach	
	ton ma pallo
Address: OS P) POPU STPEEL ST	+CE) 1100 83110
Director: Jeff Georgy	
	sten ma vallo
Address: 88 Droad Street Ba	Jet I Ma Carlo
B. OFFICERS	
President: MICHAELF. CEOPI	
Address: 88 Broad Street	
boston, ma oallo	
Vice President: Jenny Ceppi	
Address: 88 Broad Street	
Secretary: CONY CEPPI	
	sta ma 02110
Treasurer: MICHOEL F. DERDI'	,
Address: 88 Broad Street Pas	stan ma 02/10
NOTE: If necessary, you man attach an addendum to the application listing	g additional officers and/or directors.
13. I shalf Come	
(Signature of Director or Officer listed in number 12	of the application)
14. Mchael Feepoi Pusident (Typed or printed name and capacity of person sign	ning application)
fallen as benness mente enhanced at hersont sign	all breakings,

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SECRETARY OF STATE TALL ARASSEE, FLORIDA

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of ALAN GRAY INVESTIGATIVE SERVICES, INC. was filed on 04/07/1999, under the name of BROAD STREET SPECIALISTS, LTD., 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 BROAD STREET SPECIALISTS, LTD., changing its name to ALAN GRAY INVESTIGATIVE SERVICES, INC., was filed 03/06/2006.

The Biennial Statement is past due.

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 18th day of April two thousand and six.

Special Deputy Secretary of State

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