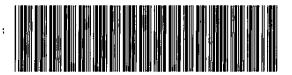
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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

11962

## **COVER LETTER**

	•			
TO: New Filing Section Division of Corporations				
SUBJECT: Nolan Glove Co., Inc				
	ration - must include suffix)			
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporation "Certificate of Existence," and check are submitted transact business in Florida.	for Authorization to Transact Business in Florida," to register the above referenced foreign corporation to			
Please return all correspondence concerning this ma	atter to the following:			
Jason E. Slatkin, Esq.	-			
	e of Person)			
Slatkin & Reynolds, P.A.				
	/Company)			
1 E. Broward Blvd., Suite 700				
	ddress)			
Ft. Lauderdale, FL 33301				
	ate and Zip code)			
For further information concerning this matter, plea	se call:			
Jason E. Slatkin at ( 954 ) 745-5880				
(Name of Person) (Area Code & Daytime Telephone Number)				
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
New Filing Section Division of Corporations	New Filing Section			
Clifton Building	Division of Corporations P.O. Box 6327			
2661 Executive Center Circle Tallahassee, FL 32301	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 & Sertified Copy \$87.50 Filing Fee, Certified Copy 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.

Nolan Glove Co., Inc.

(If name unavai	lable in Florida, enter alternate corporate n	ame adopted for the purpose of transacting	g business in Florida)
New Yo	rk	135 58 3042	
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)	
Decemb	er 2, 1930	5. Perpetual	
(Dat	e of incorporation)	(Duration: Year corp. will cease to	exist or "perpetual")
			·
		ess in Florida, if prior to registration) 07.1502, F.S., to determine penalty liabilit	v)
131 W. 3	33rd Street, 16th Floor,		3)
	(Principal office		
Same	` '	,	
	(Current mailing	address)	
Anyond	all nameitted by law		
	all permitted by law. s) of corporation authorized in home state of	or gounts, to be considered out in state of Flor	···da)
			nua)
Name and stre	et address of Florida registered agent:	• • •	75 <b>66</b>
Name:	Jason E. Slatkin, Esc	<u> </u>	CRE M
	1 E. Broward Blvd., S	Suite 700	MAY 30 MI 10: 33 CRETARY OF STATE LLAHASSEE, FLORIDA
fice Address:	Ft. Lauderdale	, Florida 33301	FIG =

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:	~
A. DIRECTORS	06 MAY ED
Chairman: Edward A. Nolan	1161 7 =
Address: 131 W. 33rd Street, 16th Floor	SECRETARY OF STATE  TALLAHASSEE, FLORIDA
New York, NY 10001	ASSEE, FLORIDA
Vice Chairman: Michael P. Nolan	~~~
Address: 131 W. 33rd Street, 16th Floor	
New York, NY 10001	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Michael P. Nolan	
Address: 131 W. 33rd Street, 16th Floor	
New York, NY 10001	
Vice President: Michael Sprinzen	
Address: 131 W. 33rd Street, 16th Floor	
New York, NY 10001	
Secretary: Michael Sprinzen	
Address: 131 W. 33rd Street, 16th Floor, New York, I	NY 10001
Treasurer: Michael P. Nolan	
Address: 131 W. 33rd Street, 16th Floor, New York, I	VY 10001
12 //	
NOTE: If necessary, you may attach an addendum to the application listing addition	nal officers and/or directors.
13. (Signature of Director or Officer listed in number 12 of the ap	nlication)
Michael P. Nolan	pneauou)

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

## State of New York Department of State State

I hereby certify, that the Certificate of Incorporation of NOLAN GLOVE CO. INC. was filed on 12/04/1930, fixing the duration as perpetual, 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.

The Biennial Statement is past due.



Witness my hand and the official seal of the Department of State at the City of Albany, this 05th day of May two thousand and six.

Daniel Shapiro

Special Deputy Secretary of State

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