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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

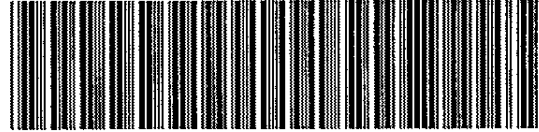
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: PURITAN SECURITIES, 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:

NATHAN LAPKIN
(Name of Person)
PURITAN SECURITIES, INC.
(Firm/Company)
980 POST ROAD EAST, 2ND FLOOR
(Address)
WESTPORT, CT 06880
(City/State and Zip code)

For further information concerning this matter, please call:

NATHAN LAPKIN at (203) 635-4380
(Name of Person) (Area Code & Daytime Telephone Number)

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STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing 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
BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

1. PURITAN SECURITIES, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NEW YORK 3. N/A
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 09/04/2003 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist)

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 980 POST ROAD EAST, 2ND FLR, WESTPORT CT 06880
(Principal office address)

980 POST ROAD EAST, 2ND FLR WESTPORT CT 06880
(Current mailing address)

8. SECURITIES/BROKERAGE
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

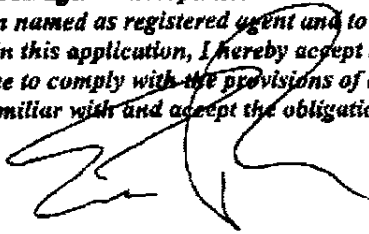
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: HEDGE CO, LLC

Office Address: 101 NORTH CLEMATIS STREET, #511
WEST PALM BEACH, Florida 33401
(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 designated in this application, I hereby accept the appointment as registered agent and agree to further agree to comply with the provisions of all statutes relative to the proper and complete performance of my position as registered agent 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 to the Department of State, by the Secretary of State or other official having custody of corporate records under the law of which it is incorporated.

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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: JERRY GRUENBAUM

Address: 980 POST ROAD EAST SECOND FLOOR
WESTPORT, CT 06880

Vice Chairman: NATHAN CAPKIN

Address: 980 POST ROAD EAST SECOND FLOOR
WESTPORT, CT 06880

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: NATHAN CAPKIN

Address: 980 POST ROAD EAST, SECOND FLOOR
WESTPORT CT 06880

Vice President: _____

Address: _____

Secretary: JERRY GRUENBAUM

Address: 980 POST ROAD EAST SECOND FLOOR WESTPORT CT
06880

Treasurer: _____

Address: _____

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STATE
TALLAHASSEE, FLORIDA

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Nathan Capkin
(Signature of Director or Officer listed in number 12 of the application)

14. VICE CHAIRMAN/ PRESIDENT
(Typed or printed name and capacity of person signing application)

State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of PURITAN SECURITIES, INC. was filed on 09/04/2003, under the name of FIRST UNION SECURITIES, INC., 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 FIRST UNION SECURITIES, INC., changing its name to PURITAN SECURITIES, INC., was filed 03/18/2004.

*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 08th day of September two
thousand and six.*



Special Deputy Secretary of State