0600006 Divisi

Florida Department of State **Division of Corporations** Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000269596 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this

page. Doing so will generate another cover sheet.

To:

Division of Corporations Fax Number : (850)205-0381

From

•				
Account	Name		C T CORPORATION SYSTEM	
Account	Number	:	FCA00000023	
Phone		1	(850) 222-1092	
Fax Numb	ber	;	(850) 878 -5926	

FOREIGN PROFIT/NONPROFIT CORPORATION

Madison Retail, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00



Electronic Filing Menu Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

8205552612 \$\$:LT 900Z/90/II

APPLICATION BY FOREIGN CORPORATION BUSINESS IN F							
IN COMPLIANCE WITH SECTION 607.1503. FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO THE REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.							
Madison Retail, Inc.	Ko Te						
(Enter name of corporation; must include "INCORPORATED," "O "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	OMPANY," "CORPORATION,"						
(If name unavailable in Florida, enter alternate corporate name adopt	ted for the purpose of transacting business in Florida)						
2 Delaware 3 52	2-2190092						
(State or country under the law of which it is incorporated)	(FEI number, if applicable)						
4. 8/17/1999 s. Pe	roetual						
	ration: Year corp. will coase to exist or "perpetual")						
 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 							
7. 2001 Pennsylvania Ave. N.W. 11th	Floor, Washington D.C. 20006						
(Principal office address) 2001 Pennsylvania Ave. N.W. 11th Floor, Washington D.C. 20006 (Current mailing address)							
8. Acting as General Partner							
(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: <u>CT Corporation System</u>							
Office Address: <u>1200 South Pine Island Rd.</u>							
Plantation	, Florida <u>33324</u>						
(City)	(Zip code)						
10 Registered agent's accentance:							

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.

Anusha Putty Vice President (Registered agent's signature) and Assistant Secretary

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.

8205557615 \$\$:LT 900Z/90/TT

	FILED					
12. Names and business addresses of officers and/or directors:	06 NOV -7 PH 12: 10					
A. DIRECTORS	TALLAHASSEE, FLORIDA					
Chairman: Please see attachment.	IALLAHASSEE, FLORIDA					
	<u></u>					
Address:						
Vice Chairman:						
Address:	ـــــــــــــــــــــــــــــــــــــ					
Director:						
Address:						
Director:						
Address:						
B. OFFICERS						
President: Please see attachment.						
Address:						
Vico President:						
Address:						
	······································					
Secretary:	<u> </u>					
Address:						
Treasurer:						
Address:						
NOTE:If necessary, you may attach an addendum to the application listing addition	mal officers and/or directors					
13 (Signature of Director or Officer listed in number 12 of the ap	pplication)					
14. Paul Andrews, Vice President						
(Typed or printed name and capacity of person signing application)						

1

T

.

FILED

06 NOV -7 PM 12: 10

ALLAHASSEE, FLORIDA

1 7 1

ATTACHMENT TO ITEM 12 OF APPLICATION

A. DIRECTORS:

Amer Hammour 2001 Pennsylvania Ave. N.W. 11th Floor Washington, D.C. 20006

Gary Mottola 2001 Pennsylvania Ave. N.W. 11th Floor Washington, D.C. 20006

David C. Brainerd 2001 Pennsylvania Ave. N.W. 11th Floor Washington, D.C. 20006

William D. Anthony 2001 Pennsylvania Ave. N.W. 11th Floor Washington, D.C. 20006

B. OFFICERS

Executive Vice President

President

Amer Hammour 2001 Pennsylvania Ave. N.W. 11th Floor Washington, D.C. 20006

Gary Mottola 2001 Pennsylvania Ave. N.W. 11th Floor Washington, D.C. 20006

David C. Brainerd 2001 Pennsylvania Ave. N.W. 11th Floor Washington, D.C. 20006

William D. Anthony 2001 Pennsylvania Ave. N.W. 11th Floor Washington, D.C. 20006

Paul Andrews 2001 Pennsylvania Ave. N.W. 11th Floor Washington, D.C. 20006

Vice President

Vice President and Assistant Secretary

Vice President, Secretary and Treasurer

Delaware PAGE 1 FALLAHASSEE, FLORIDA

FILED 06 NOV -7 PM 12: 11 SEURLIARY OF STATE

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MADISON RETAIL, INC." IS DULY INCORPORATED UNDER THE LAWS 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 THIRTIETH DAY OF OCTOBER, A.D. 2006.

AND I DO HERKBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

Harriet Smith Mindson Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5150355 DATE: 10-30-06

308**44**07 **8300** 060996216