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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Dublin Management Associates of NJ, 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:

John C. Seaver
(Name of Person)
Dublin Management Associates of NJ, Inc.
(Firm/Company)
7 Campus Drive
(Address)
Burlington, New Jersey 08016
(City/State and Zip code)

For further information concerning this matter, please call:

John C. Seaver at (609) 387-1600
(Name of Person) (Area Code & Daytime Telephone Number)

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 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.

1. DUBLIN MANAGEMENT ASSOCIATES OF NEW JERSEY, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. New Jersey 3. 22-2939048
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/30/1988 5. Perpetual
(Date of incorporation) (Duration; Year corp. will cease to exist or "perpetual")

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

7. 7 Campus Drive, Burlington, NJ 08016
(Principal office address)

7 Campus Drive, Burlington, NJ 08016
(Current mailing address)

8. Museum Development
(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: CT Corporation

Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(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 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.

Peter F. Souza
Assistant Secretary

(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.

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

A. DIRECTORS

Chairman: Thomas Gorman

Address: 7 Campus Drive

Burlington, NJ 08016

Vice Chairman: _____

Address: _____

Director: Michael A. Carrozza

Address: 7 Campus Drive

Burlington, NJ 08016

Director: _____

Address: _____

B. OFFICERS

President: Michael A. Carrozza

Address: 7 Campus Drive

Burlington, NJ 08016

Vice President: John C. Seaver

Address: 7 Campus Drive

Burlington, NJ 08016

Secretary: John C. Seaver

Address: 7 Campus Drive, Burlington, NJ 08016

Treasurer: Michael A. Carrozza

Address: 7 Campus Drive, Burlington, NJ 08016

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

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. John C. Seaver Vice President

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

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STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

DUBLIN MANAGEMENT ASSOCIATES OF NEW JERSEY, INC.

0100397425

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on November 30, 1988.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

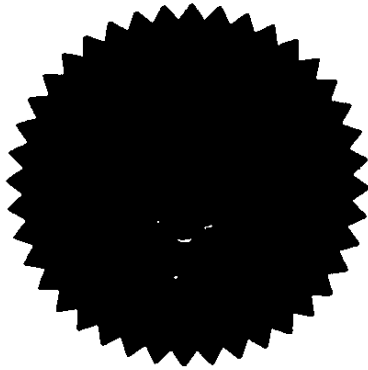
I further certify that the registered agent and registered office are:

*Michael A. Carrozza
7 Campus Drive
Burlington, NJ 08016*

Continued on next page . . .

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

DUBLIN MANAGEMENT ASSOCIATES OF NEW JERSEY, INC.



IN TESTIMONY WHEREOF, I have
hereunto set my hand and
affixed my Official Seal
at Trenton, this
24th day of May, 2007

Bradley Abelow

Bradley Abelow
State Treasurer