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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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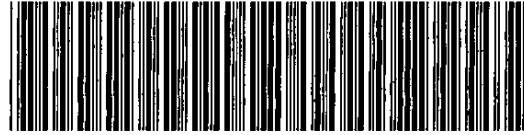
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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06/25/07--01030--001 \*\*70.00

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AND  
FILED

07 OCT -2 PM 2:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W07-29922

B. McKnight OCT 02 2007

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** DRILLCO NATIONAL GROUP, 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:

JAMES WIEDER

(Name of Person)

DRILLCO NATIONAL GROUP, INC

(Firm/Company)

24-32 44<sup>TH</sup> STREET

(Address)

LONG ISLAND CITY, NY 11103

(City/State and Zip code)

For further information concerning this matter, please call:

JAMES WIEDER

(Name of Person)

at ( 718 ) 726-9801

(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 25, 2007

JIM WIEDER  
PO BOX 2182  
LONG ISLAND CITY, NY 11102

SUBJECT: DRILLCO NATIONAL GROUP INC  
Ref. Number: W07000029922

We have received your document for DRILLCO NATIONAL GROUP INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

The registered agent must sign accepting the designation.

The name and title of the person signing the document must be noted beneath or opposite the signature.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6931.

Becky McKnight  
Document Specialist  
New Filing Section

Letter Number: 807A00041535

**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. DRILLCO NATIONAL GROUP, 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. NY 3. 11-351-1331  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/12/97 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 8/1/07  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 24-32 44<sup>th</sup> STREET LONG ISLAND CITY, NY 11103  
(Principal office address)

PO BOX 2182 LONG ISLAND CITY, NY 11102  
(Current mailing address)

8. RETAIL SALES CONSTRUCTION EQUIPMENT  
(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: INCOBP SERVICES, INC.

Office Address: 17888 67<sup>th</sup> COURT NORTH

LOXAHATCHEE, Florida 33470  
(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.*

Sarah Gibson on behalf of IncoBP Services, Inc.  
(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.

07 OCT -2 PM 3:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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AND  
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07 OCT -2 PM 3:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**B. OFFICERS**

President: PATRICK LACEY

Address: 24-32 44<sup>TH</sup> STREET  
LIC, NY 11103

Vice President: NICHOLAS LACEY

Address: 24-32 44<sup>TH</sup> STREET  
LIC, NY 11103

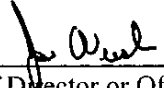
Secretary: JAMES WIEDER

Address: 24-32 44<sup>TH</sup> STREET, LIC, NY 11103

Treasurer: JAMES WIEDER

Address: 24-32 44<sup>TH</sup> STREET, LIC, NY 11103

**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. JAMES WIEDER SECRETARY/TREASURER  
(Typed or printed name and capacity of person signing application)

**State of New York**  
**Department of State** } ss:

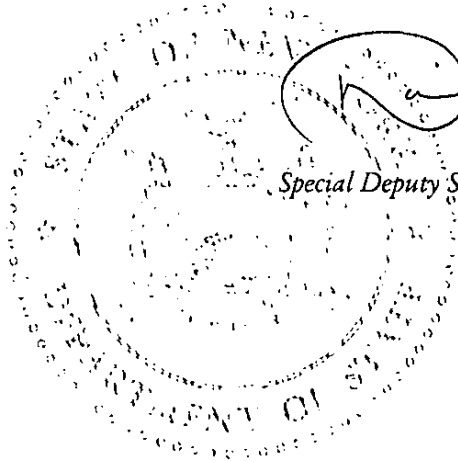
I hereby certify, that the Certificate of Incorporation of DRILLCO NATIONAL GROUP, INC. was filed on 10/08/1999, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, 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.

\*\*\*

*WITNESS my hand and the official seal  
of the Department of State at the City of  
Albany, this 20th day of September two  
thousand and seven.*

*[Signature]*  
Special Deputy Secretary of State

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07 OCT -2 PM/3:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED