

F080000000155

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. BURCH JAN 14 2008

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: ARBOR CAPITAL MANAGEMENT CORP
(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:

LAWRENCE T. MCGOWAN
(Name of Person)
ARBOR CAPITAL MANAGEMENT CORP
(Firm/Company)
100 CORPORATE PARKWAY - SUITE 136
(Address)
AMHURST, N.Y. 14226-1200
(City/State and Zip code)

For further information concerning this matter, please call:

LAWRENCE MCGOWAN at (216) 446-9111
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 2, 2008

LAWRENCE T. MCGOWAN
100 CORPORATE PKWY STE 136
AMHERST, NY 14226

SUBJECT: ARBOR CAPITAL MANAGEMENT CORP.
Ref. Number: W08000000124

We have received your document for ARBOR CAPITAL MANAGEMENT CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of incorporation on your application number 4 and the date of incorporation on your certificate must match.

Please return 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) 245-6928.

Tim Burch
Regulatory Specialist II

Letter Number: 208A00000082

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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1. ARBOR CAPITAL MANAGEMENT CORP.

(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 YORK

(State or country under the law of which it is incorporated)

3. 16-1468977

(FEI number, if applicable)

4. October 17, 1994

(Date of incorporation)

5. PERPETUAL

(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. 100 CORPORATE PARKWAY-SUITE 136 AMHERST, N.Y. 14226

(Principal office address)

SAME

(Current mailing address)

8. INVESTMENT ADVISORY

(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: D. BRUCE KRATZ, ESQ.

Office Address: 215 ANHANGA WYE

JUPITER

(City)

, Florida 33458

(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.

D. Bruce Kratz

(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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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: LAWRENCE T. MCGOWAN

Address: 50 COBBLESTONE LANE
WILLIAMSVILLE, N.Y. 14221

Vice Chairman: GERALD T. COLE

Address: 25 JOLLS LANE
ORCHARD PARK, N.Y. 14127

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: LAWRENCE THOMAS MCGOWAN

Address: 50 COBBLESTONE LANE
WILLIAMSVILLE, N.Y. 14221

Vice President: GERALD THOMAS COLE

Address: 25 JOLLS LANE
ORCHARD PARK, N.Y. 14127

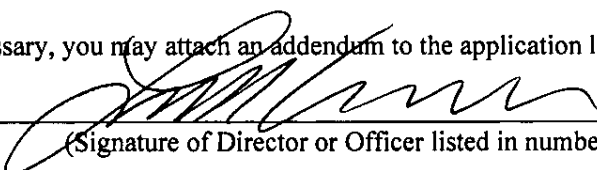
Secretary: GERALD THOMAS COLE

Address: 25 JOLLS LANE, ORCHARD PARK, N.Y. 14127

Treasurer: _____

Address: _____

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. LAWRENCE THOMAS MCGOWAN
(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 ARBOR CAPITAL MANAGEMENT CORP. was filed on 10/17/1994, under the name of ARDMORE CAPITAL MANAGEMENT CORP., 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 ARDMORE CAPITAL MANAGEMENT CORP., changing its name to ARBOR CAPITAL MANAGEMENT CORP., was filed 01/26/1995.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 14th day of December
two thousand and seven.*

Daniel Shapiro
Special Deputy Secretary of State

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TALLAHASSEE, FLORIDA