

F0800000/068

Florida Department of State
Division of Corporations
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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To:

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Fax Number : (850) 617-6381

From:

Account Name : ALLSTATE CORPORATE SERVICES CORP
Account Number : I20040000031
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FOREIGN PROFIT/NONPROFIT CORPORATION

GEORGESON GROUP INC.

Certificate of Status	0
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DIVISION OF CORPORATION

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**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. GEORGESON 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. NEW YORK STATE

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

3.

(FEI number, if applicable)

4. 07-31-2007

(Date of incorporation)

5.

PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. UPON FILING.

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

7. 305 2ND AVENUE, SUITE 526, NEW YORK, NY 10003

(Principal office address)

305 2ND AVENUE, SUITE 526, NEW YORK, NY 10003

(Current mailing address)

8. COMMERCIAL INTERIOR DESIGN SERVICES

(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: **ALAN GEORGESON**

Office Address: **780 FIFTH AVENUE SOUTH, SUITE 200**

NAPLES

(City)

Florida 34102

(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.


(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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: ALAN GEORGESON

Address: 26B ANCHOR DRIVE, KEY LARGO, FL 33037

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: ALAN GEORGESON

Address: 26B ANCHOR DRIVE, KEY LARGO, FL 33037

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

14. ALAN GEORGESON, President
(Typed or printed name and capacity of person signing application)

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State of New York
Department of State } ss:

I heraby certify, that the Certificate of Incorporation of GEORGESON GROUP INC. was filed on 07/31/2007, 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.

I further certify, that no other documents have been filed by such Corporation.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 05th day of March
two thousand and eight.*

Daniel Shapiro
Special Deputy Secretary of State

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