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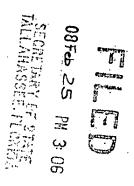
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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February 27, 2008

SEYMOUR ROBIN 351 NE 19TH PL WILTON MANOR, FL 33305

SUBJECT: S. ROBIN LTD Ref. Number: W08000010405

We have received your document for S. ROBIN LTD and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The use of LIMITED or LTD. is not sufficient as a corporate suffix. The name must include a word such as INCORPORATED, INC., CORPORATION or CORP.

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 corrected 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) 245-6955.

Letter Number: 608A00012241

Suzanne Hawkes Regulatory Specialist II New Filing Section

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: S. ROBIN LTD		
(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 transact business in Florida.	to	
Please return all correspondence concerning this matter to the following:		
SEYMDUR ROBIN		
Sefmour ROBIN (Name of Person)	_	
S. ROBIN LTD (Firm/Company)		
(Firm/Company)		
351 N.E. 19 T. PL.		
(Address)	_	
WILton MAMORS, Florida. 33305		
(City/State and Zip code)		
For further information concerning this matter, please call:		
For further information concerning this matter, please call:		
Sey Mour Robin at (954) 579 1982 (Name of Person) (Area Code & Daytime Telephone Number)		
(Name of Person) (Arca Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS: New Filing Section New Filing Section		
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327		
2661 Executive Center Circle Tallahassee, FL 32301 Tallahassee, FL 32301		
Enclosed is a check for the following amount:		
\$70.00 Filing Fee & \$78.75 Filing Fee & \$78.75 Filing Fee & Certificate of Status Certified Copy Certified Copy	15 &	

FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO COREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

	L'to CORP		
Enter name of corporation; must include "INCORPORATE! "Inc.," "Co.," "Corp." "Inc.," "Co," or "Corp.")	D," "COMPANY," "CORPORATION,"		
	The state of the s		
(If name unavailable in Florida, enter alternate corporate name	1		
2. NEW YORK STATE (State or country under the law of which it is incorporated)	(FEI number, if applicable)		
4. (C-1999) 5 (Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")		
6. HAVE NOT SOLD ANY	MERCHARDIST IN FLA		
6. HAVE NOT SOLD HAY MEKCHAANSE (NO FLA. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)			
7 351 NE. 19 TIPL	Witten MANORS De 3-3305		
7. 351 NF. 19 TIPL WILTON WATIORS, DR. 3-3305 (Principal office address)			
351 N.E. 19th P	L WILTON HAMORS, Pl. 33305		
(Current mailing ad	dress)		
8. Wholestle Jenelry SOLD to Stores WIR INTERNET. (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)			
(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: SEYMOUR RO	B/N 25 8		
Office Address: 351 W.E. 19 5 PL			
	** ***		
(City)	, Florida 3330 N		
10. Paristand another accordance	P P		
10. Registered agent's acceptance: Having been named as registered agent and to accept serv	rice of process for the above stated corporation at the place		
aesignatea in this application, I hereby accept the appoint	ment as registered agent and agree to act in this expacity. I relative to the proper and complete performance of my duties,		
and I am familiar with and accept the obligations of my p			
() (
X Gillian C			
(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.



12. Names and business addresses of officers and/or directors:	08 Feb 25 PM 3:06
A. DIRECTORS	TS COME SE PM
Chairman: MA	- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10
Address:	TASE CASTAGE STATES OF
1.11	*
Vice Chairman: M/A	
Address:	
Director: M/A	
Address:	
Director: UV A	
Address:	\ Note the
B. OFFICERS	
President: SEYMOUR ROBIN	
President: SEYMOUR ROBIN Address: 351 N.E. 19 J. PL WILTON MANORS, 5	7l, 33305
Vice President: MA	
Address:	
Secretary: MA.	
Address:	
Treasurer: M/A.	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional additional actions are application and additional actions and additional actions are applications and additional actions are applications.	tional officers and/or directors.
13. Sypun	
(Signature of Director or Officer listed in number 12 of the	application)
14. (SEYMOUR ROBIN (Typed or printed name and capacity of person signing as	oplication)
As North As Estimate the man ambients, as Nessan at Columbia.	

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of S. ROBIN LTD. was filed on 06/15/1999, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed wit this Department for a certificate, order, or record of a dissolution, an 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 11th day of March two thousand and eight.

Special Deputy Secretary of State

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