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(Requestor's Name)
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(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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COVER LETTER

	New Filing So Division of C					
SUBJE	ЕСТ: <u>Р</u> е	ali Capita				
		(Name o	of corpor	ration - must in	iclude suffix)
Dear Si	r or Madam:					
"Certifi		nce," and check are su				act Business in Florida." enced foreign corporation to
Please r	return all corre	spondence concerning	g this ma	atter to the foll	owing:	
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	_		(Nam	e of Person)		
Pal	icap	tal. Inc				
		()	(Firm	/Company)		
650	FIAN	n Avenue	12	tin Fic		
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	•		(City/Sta	ate and Zip co	de)	
For furt	her informatio	n concerning this mat	iter, plea	se call:		
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سلا	(Name of Per		t (2-1 ' Ar			hone Number)
	New Filing So Division of Co Clifton Buildi	orporations ng /c Center Circle	:		MAILING A New Filing S Division of C P.O. Box 632 Tallahassee,	section Corporations 27
Enclose	ed is a check fo	or the following amou	nt:			
\$70.0	00 Filing Fee	\$78.75 Filing F Certificate of		\$78.75 Fi	ling Fee & Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

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

тс., со., сс	orp," "Inc," "Co," or "Corp.")			
(If name unavaila	able in Florida, enter alternate co	orporate name adopt	ed for the purpose of transacting	g business in Florida)
Delaw	ander the law of which it is inco	3	13-384-4	902
				icable)
SCTODE	r 2,2001	5	perpernal	
(Date	of incorporation)	(Du	ration: Year corp. will cease to	exist or "perpetual")
NIA	(Data Carta)	. 11		
			ida, if prior to registration) .S., to determine penalty liabilit	y)
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650 Ful Financia	m Avenue, 60 th (Current) (Current) (Current)	nt mailing address)	M M 100 19	
650 Ful Financia	m Avenul, 6 ^m (Currer	nt mailing address)	M M 100 19	
Financia (Purpose(s)	m Avenue, 60 th (Current) (Current) (Current)	nt mailing address)	to be carried out in state of Flor	
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Financia (Purpose(s) Name and street	Currer Currer Currer Currer al Services of corporation authorized in ho t address of Florida registered Gilbert Charlstr	ome state or country d agent: (P.O. Bo	to be carried out in state of Flor	
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Financia (Purpose(s) Name and stree Name: fice Address:	(Currer Charlstrest) Services of corporation authorized in how the address of Florida registered Gilbert Charlstres and Terrace Boca Ratum (City) gent's acceptance:	ome state or country d agent: (P.O. Box	to be carried out in state of Florica NOT acceptable) Florida 33432 (Zip code)	rida)
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Financia (Purpose(s) Name and stree Name: fice Address: Registered againg been name	(Currer Charlstrest) Services of corporation authorized in how the address of Florida registered Gilbert Charlstres and Terrace Boca Ratum (City) gent's acceptance:	ome state or country d agent: (P.O. Box	to be carried out in state of Florica NOT acceptable) Florida 33432 (Zip code) process for the above stated as registered agent and agree	rida) corporation at the place to act in this capacity

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:	
A. DIRECTORS	•
Chairman: Bradley Reifter	·····
Address: 123 Fraleigh Road, Millbrook	, NY 12548
Director Vice Chairman: Best Cohen	
Address: 5000-4A Estate Enighed #65	
St. John, USVI 00830	
Director: Kevin Fisher	7.53
Address: 103 Greene St. #6B	4 4
New York, NY 10012	
Director: David Wasitouski	19 > O
	55 -
Address: 5 Laga Ct. Ringoes, NJ 08551	200
B. OFFICERS	•
President: Kavin Fisner	
Address: 103 Greene St. #6B	
New York, NY 10012	
Vice President: NA	
Address:	
Addiess.	
Secretary: Dervelle Janey Address: 32 West 128th St. #3 New York, NS	/
_	7 10027
Treasurer: John Mullin - CFO	-
Address: 18 Gln Road Garden City, NY 11530)
NOTE: If necessary, you may attach an addendum to the application listing addi-	tional officers and/or directors.
13. (Signature of Director of Officer listed in number 12 of the	
	application)
14(Typed or printed name and capacity of person signing ap	oplication)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PALI CAPITAL, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF JULY, A.D. 2008.

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Warriet Smith Windson, Secretary of State

AUTHENTICATION: 6749019

DATE: 07-24-08

You may verify this certificate online at corp.delaware.gov/authver.shtml