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Florida Department of State
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Division of Corporations
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From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
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FOREIGN PROFIT/NONPROFIT CORPORATION**NACHMANHAYSBROWNSTEIN, INC.**

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DIVISION OF CORPORATION
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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. NAHMANHAYSBROWNSTEIN, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. PENNSYLVANIA

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

3. 23-2735012

(FBI number, if applicable)

4. AUGUST 5, 1993

(Date of incorporation)

5. PERPETUAL

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

6. N/A

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

7. 822 MONTGOMERY AVENUE, NARBERTH, PA 19072

(Principal office address)

822 MONTGOMERY AVENUE, NARBERTH, PA 19072

(Current mailing address)

8. CONSULTING

(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: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

Florida

33324

(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.

CT Corporation System

By: Connie Bryan

(Registered agent's signature)

CONNIE BRYAN
SPECIAL ASSISTANT

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:

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A. DIRECTORS

Chairman: HOWARD B. BROWNSTEIN

Address: 822 MONTGOMERY AVENUE, NARBERTH, PA 19072

Vice Chairman: THOMAS D. HAYS, III

Address: 822 MONTGOMERY AVENUE, NARBERTH, PA 19072

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: THOMAS D. HAYS III

Address: 822 MONTGOMERY AVENUE, NARBERTH PA 19072

Vice President: HOWARD BROWNSTEIN

Address: 822 MONTGOMERY AVENUE, NARBERTH PA 19072

Secretary: HOWARD B. BROWNSTEIN

Address: 822 MONTGOMERY AVENUE, NARBERTH PA 19072

Treasurer: THOMAS D. HAYS III

Address: 822 MONTGOMERY AVENUE, NARBERTH PA 19072

NOTE: If necessary you may attach an addendum to the application listing additional officers and/or directors.

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

14. THOMAS D. HAYS III
(Typed or printed name and capacity of person signing application)

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CLERK OF SUPERIOR COURT
ALACHUA COUNTY, FLORIDA

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COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

OCTOBER 16, 2008

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

NACHMANHAYSBROWNSTEIN, INC.

**is duly Incorporated under the laws of the Commonwealth of Pennsylvania and
remains a subsisting corporation so far as the records of this office show, as of
the date herein.**



**IN TESTIMONY WHEREOF, I have
hereunto set my hand and caused
the Seal of the Secretary's Office to
be affixed, the day and year above
written.**

Pedro A. Cantis

Secretary of the Commonwealth

Certification Number: 7683535-1

Verify this certificate online at <http://www.corporations.state.pa.us/corp/soskb/verify.asp>