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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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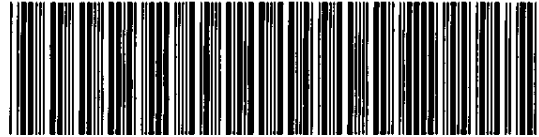
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6 Burch JAN 8 2009

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Capacity Benefits Group, Inc.

(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:

Frederick R. Gerson, Esq./Linda Michalik, Legal Assistant

(Name of Person)

Robinson & Gerson, P.C.

(Firm/Company)

7102 Three Chopt Road

(Address)

Richmond, Virginia 23226

(City/State and Zip code)

For further information concerning this matter, please call:

Frederick R. Gerson, Esq.

Linda L. Michalik, Legal Asst. at (804) 288-1801

(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

**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. Capacity Benefits Group, Inc.

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

CAP Benefits & Insurance Agency, Inc.

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

2. New Jersey 3. 22-3335537

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

(FEI number, if applicable)

4. 10/08/1997

(Date of incorporation)

5. Perpetual

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

6. Upon Approval

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. One International Boulevard, Mahwah, NJ 07495

(Principal office address)

One International Boulevard, Mahwah, NJ 07495

(Current mailing address)

8. Non-resident insurance agency sales & service

(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: John D. Hatch, Esq.

Office Address: 1267 Berkshire Lane, Suite 200

Tarpon Springs

(City)

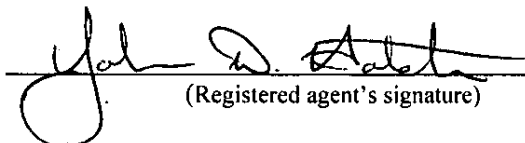
, Florida

34688

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

A. DIRECTORS

Chairman: Dominic A. Morelli

Address: One International Boulevard
Mahwah, NJ 07495

Vice Chairman: Mark B. Weinraub

Address: One International Boulevard
Mahwah, NJ 07495

Director: Robert G. Lull

Address: One International Boulevard
Mahwah, NJ 07495

Director: Carl A. Gerson

Address: One International Boulevard
Mahwah, NJ 07495

B. OFFICERS

President: Dominic A. Morelli

Address: One International Boulevard
Mahwah, NJ 07495

Vice President: Mark B. Weinraub

Address: One International Boulevard
Mahwah, NJ 07495

Secretary: Carl A. Gerson

Address: One International Boulevard, Mahwah, NJ 07495

Treasurer: Robert G. Lull

Address: One International Boulevard, Mahwah, NJ 07495

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. Dominic A. Morelli, President

(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

**STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING**

CAPACITY BENEFITS GROUP, INC.

0100603446

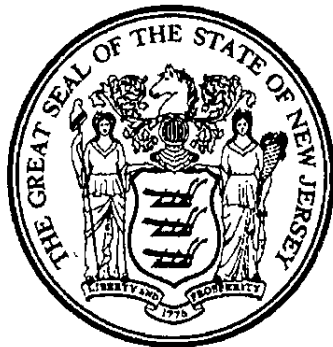
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TALLAHASSEE, FLORIDA

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on October 7, 1994.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

*Williams Caliri Miller & Otley P C
1428 Route 23
Wayne, NJ 07470*



Certification# 113257445

*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed my
Official Seal at Trenton, this
17th day of December, 2008*

A handwritten signature in dark ink, appearing to read "R. David Rousseau".

*R. David Rousseau
State Treasurer*

Verify this certificate at
https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp