F09000000722

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2009 FEB 23 P 2:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB 24 2009
D.A. WHITE

FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 21, 2009

PETER LEITNER/JUDITH LYNCH
XAL INC.
394 BROADWAY
NEW YORK, NY 10013

SUBJECT: XAL INC.
Ref. Number: W09000003097

We have received your document for XAL INC. and your check(s) totaling $70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White
Regulatory Specialist II

Letter Number: 809A00002196

1/29/09
returned

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DEPT. OF REVENUE SERVICES
REGISTRATION SECTION

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 10, 2009

PETER LEITNER
XAL INC.
394 BROADWAY
NEW YORK, NY 10013

SUBJECT: XAL INC.
Ref. Number: W09000006398

We have received your document for XAL INC. and your check(s) totaling $70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Unable to contact you directly by telephone 2/10/09.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White
Regulatory Specialist II

Letter Number: 709A00004666

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DEPARTMENT OF STATE
09 FEB 23 AM 11:15

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: XAL 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:

Peter Leitner / Judith Lynch
(Name of Person)

XAL INC
(Firm/Company)

394 Broadway
(Address)

New York, NY 10013
(City/State and Zip code)

For further information concerning this matter, please call:

Judith Lynch at (212) 343-8100
(Name of Person) (Area Code & Daytime Telephone Number)

Peter Leitner

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

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2008 FEB 23 P 2:32
SECRETARY OF STATE
TALLAHASSEE, 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. XAL 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 or country under the law of which it is incorporated)

3. 13-4144608
(FEI number, if applicable)

4. 11/1/2000
(Date of incorporation)

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

6. 10/1/08
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 394 Broadway - New York, NY 10013
(Principal office address)

394 Broadway - New York, NY 10013
(Current mailing address)

8. Sale of lighting fixtures
(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: Peter Leitner c/o Stetler

Office Address: 465 Ocean Drive

Miami Beach, Florida 33139
(City) (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.

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. DIRECTORS

Chairman: _____

Address: _____

_____

Vice Chairman: _____

Address: _____

_____

Director: _____

Address: _____

_____

Director: _____

Address: _____

_____

B. OFFICERS

President: Peter Leitner

Address: 394 Broadway
New York, NY 10013

Vice President: _____

Address: _____

_____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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. Peter Leitner - President
(Typed or printed name and capacity of person signing application)

1/14/09

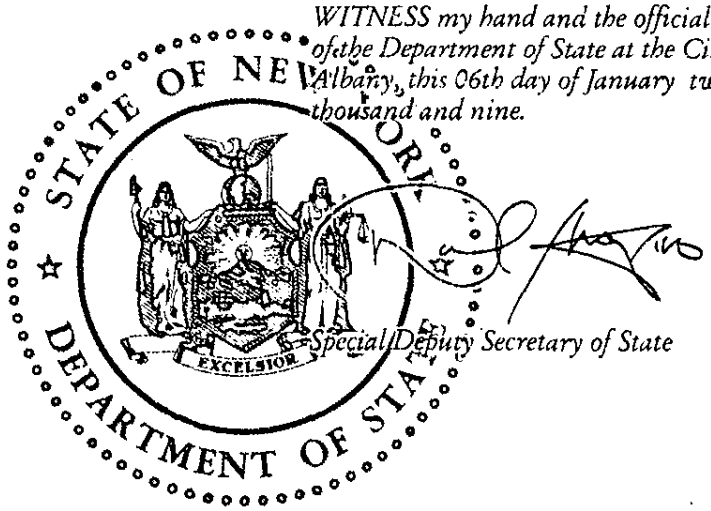
State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of XAL INC. was filed on 11/01/2000, under the name of XENON LIGHT INC., 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.

A Certificate of Amendment XENON LIGHT INC., changing its name to XAL INC., was filed 03/15/2007.

***

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 06th day of January two thousand and nine.



Special Deputy Secretary of State

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TALLAHASSEE, FLORIDA