# F9498802883

(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:

Office Use Only



800158584518

07/17/09--01043--011 \*\*70.00

PILLU 2009 JUL 17 P 2: SEGRETARY OF STA

2-30-08

#### **COVER LETTER**

				Ž <sub>a</sub> S	
	,	COVER	R LETTER	· · · · · · · · · · · · · · · · · · ·	Contraction of the second of t
то:	New Filing Section Division of Corporations				5. 7.15 A. 7. 29
SUBJ	ECT: $\mathcal{E}\mathcal{B}$	Excal ame of corpora	ibur i	INC.	
	N	ame of corpora	ition - must inc	clude suffix	
Dear S	ir or Madam:				
"Certif	closed "Application by Foreign icate of Existence," and check the business in Florida.	gn Corporation k are submitted	for Authoriza to register the	tion to Transac above referen	et Business in Florida," aced foreign corporation to
Please	return all correspondence cor	_	,		
	EUZENE	PN	EST Edo	1	
	_		• • • • • • • • • • • • • • • • • • • •		
	EB Exc	alibue	. Inc ·		
	2 0	Firm/	Company		
	EB Exco	c 772	634		
	_	Α	Address		
	Miami GNESSEda E-mail ac	FE	33177	-2634	
		City/Sta	ate and Zip co	de	
	GNESSEda	a Ebe	excalib	UR.CO.	M
	E-mail ac	ddress: (to be u	sed for future	annual report r	notification)
For fu	rther information concerning				
	/		./	2 -	_ / .
	Name of Person	at (	305) 4	17.8080	EX7 242
	Name of Person	Α	rea Code & D	aytime Teleph	one Number
	STREET/COURIER ADD New Filing Section	DRESS:		MAILING A New Filing Se	
	Division of Corporations			Division of C	
	Clifton Building			P.O. Box 632	
	2661 Executive Center Circ Tallahassee, FL 32301	ele		Tallahassee, F	L 32314
Enclos	sed is a check for the followin	g amount			
		_			
<b>≱</b> (\$70	0.00 Filing Fee \$78.75 I Certifi	Filing Fee & icate of Status	\$78.75 Certifie	Filing Fee & d Copy	Certificate of Status & Certified Copy

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

EGISTER A FORI	WITH SECTION 607.150 EIGN CORPORATION T	TO TRANSACT BU	JSINESS IN T			D TO
	Excalibu					
(Enter name of con "Inc.," "Co.," "Con	poration; must include "IN p," "Inc," "Co," or "Corp."	COŔPORATED,"  )	"COMPANY,	" "CORPORAT	TON,"	
(If name unavailab	ele in Florida, enter alternat					Florida)
	<i>aware</i>	3	27	7_0363	3707	
(State or country us	nder the law of which it is i	incorporated)		(I DI Hullion, II	i A	
6	1/12/09	5.		PERPET	val	
(Date o	of incorporation)				e to exist or "perp	etual")
	Tulus	2009		-		•
	(Date first trai	nsacted business in	Florida if prio	r to registration)		<del> </del>
	(SEE SECTIONS 6		2, F.S., to dete	rmine penalty lia	bility)	
ر ا	755 5W 119			liami,	£ 3318	9/
		incipal office addre	70F /	-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	36
	<b>^</b>	•	<i>à</i>	^ -	33177 - 2	
	O Box 77.	2634 1	inni	72 3	3177 - 0	<u>4634</u>
	(Cu	ırrent mailing addre	ss)			
wh	olesaler of	Electroni	c cor	ISUMER	Soods	
(Purpose(s)	of corporation authorized in	n home state or cou	ntry to be carri	ed out in state of	Florida)	
Name and street	address of Florida registe	ered agent: (P.O.	Box NOT ac	ceptable)	<del></del>	
Name:	[3755 5U	P NESG.	Eda		SECR	-71
ffice Address:	13755 50	J 119th G	YENDE		JUL I	
	Min =		121 . 1	.20,0/	<u>%</u> 2~	in
	(City		, Florida	(Zip code)	ਹ ਵਿੱਚ	
	(City)	,		(Zip code)	25. 25. 25. 25. 25.	
. Registered age					중 중 경 2	•
	d as registered agent and					
	pplication, I hereby accomply with the provisions					
	riply wan the provisions with and accept the oblig				nete perjorman	ce oj my auti
		, ay may pool				
	< 1	. 0				
	En N.	$\mathcal{X}$				

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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:
12. Names and business addresses of officers and/or directors:  A. DIRECTORS
Chairman:
Address:
TO ATE
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: Eugene f. Nesbeda  Address: C/o Cutec Group 200 Park avenue - 20th floor  New York, NY 10166  Vice President: Michael E. Najjap & David L. Schnadig  Address: C/o Cortec Group 200 Park avenue - 20th floor
Address: c/o Cutec Group 200 Park CIVENUE - 20th Hoor
NEW York, NY 10166
Vice President: Michael E. Najjap & David L. Schnadis
Address: C/o Cortec Group 200 Park WEAUE - 20th Floor
NEW York, NY 10166
Secretary: Michael E. Wajjar
Address:
Treasurer: Michael E. Najjar
Address:
NOTE: If
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
(Signature of Director or Officer listed in number 12 of the application)
14. EUSELE P. NESBEDA
(Typed or printed name and capacity of person signing application)

# Delaware

PAGE 1

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "EB EXCALIBUR, 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 SIXTEENTH DAY OF JULY,

A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EB EXCALIBUR, INC." WAS INCORPORATED ON THE TWELFTH DAY OF JUNE, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

2000 JUL 17 P 2: 29

E

1696043 8300

090703447

Jeffrey W Bullock, Secretary of Sta **AUTHENTICATION:** 7421576

DATE: 07-16-09

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