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TO: **New Filing Section**

Division of Corporations

BROY GIROUP INC.,
(Name of corporation - must include suffix)

Disease actions all commenced decrees any amount on this matter to the followings

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.

ase return an	correspondence concerning this matter to the following.	
ROY	Y MATHEN	
	(Name of Person)	
BROY	GROUP INC	
	(Firm/Company)	
99 /	MORRIS AVE	
•	(Address)	
SPRI	WAFIELD, NJ-07081	
	(City/State and Zip code)	

For further information concerning this matter, please call:

ROY MATHEW at (973) 912 9898

(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:

□\$78.75 Filing Fee & ☐ \$70.00 Filing Fee □ \$78.75 Filing Fee & **23**\$87.50 Filing Fee, Certificate of Status Certificate of Status & Certified Copy 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. BROY GIROUP INC
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
BROY GROUP INCORPORATED
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. NEW JERSEY (State or country under the law of which it is incorporated) 3. 20-5974088 (FEI number, if applicable)
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 10/30/2006 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 07/15/2009
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 99 MORRIS AVE, SPRINGFIELD, NJ-07081-1425 (Principal office address)
99 MORRIS AVE, SPRINGFIELD, NJ-07081-1425
(Current mailing address)
8. ENGRAE IN BUSINESS IN INFORMATION TECHNOLOGY
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: ROY MATHEW 22
Office Address: 6/42 EDDY STONE TRAIL
JACKSONVILLE, , Florida 32258 (City) (Zip code)
(Eng.) (Enpeddo)

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:

A. DIRECTORS	2009 DE LED
Chairman:	2009 DET - D
Address:	TALLAHASSEE OF ST. FLORION
/ice Chairman:	TORISE.
ddress:	
.duress:	
Director: ROY MATHEW	
address: 99 MORRIS AVE,	SPRING FIELD, NJ-07081
Pirector: JOHN B SAND	ANAM
address: 99 MORRIS AVE	SPRINGFIELD, NJ-07081
Address:	
ice President:	
ddress:	
ecretary:	
ddress:	
reasurer:	
ddress:	
0 / 1 1 0	dum to the application listing additional officers and/or directors.
3. ROY I'M ROY MATHEW	Officer listed in number 12 of the application)
2	•
4. ROY MATHEW (DIRECTOR)	e and capacity of person signing application)

STATE OF NEW JERSEY DEPARTMENT OF TREASURY SHORT FORM STANDING

BROY GROUP INC.

0100970330



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 30, 2006.

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:

Roy Mathew 99 Morris Ave Springfield, NJ 07081



Certification# 115998933

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 18th day of December, 2009

R. David Rousseau State Treasurer

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