

Division of Corporations

Page 2 of 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the tax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000212521 3)))



H100002125213AHCO

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number: (850) 617-6301

From:

Account Name: LEGALZOOM.COM INC.
Account Number: 120010090062
Phone: (323) 962-8600
Fax Number: (323) 962-3809

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

DIVISION OF CORPORATIONS

10 SEP 30 AM 7:49

RECEIVED

FOREIGN PROFIT/NONPROFIT CORPORATION
SIGN LANGUAGE RESOURCES INC.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

2010 SEP 30 PM 12:48

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

10/1/10

850-817-8381

9/28/2010 3:03:49 PM PAGE

1/001

Fax Server



September 28, 2010

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LEGALZOOM.COM INC.

SUBJECT: SIGN LANGUAGE RESOURCES INC
REF: W10000045306

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

If you have any further questions concerning your document, please call (850) 245-6995.

Wanda Cunningham
Regulatory Specialist II
New Filing Section

FAX Aud. #: H10000212521
Letter Number: 110A00023033

REC
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2010 SEP 30 PM12:48

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SIGN LANGUAGE RESOURCES 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:

Barbara Dang
(Name of Person)
Legalzoom.com, Inc.
(Firm/Company)
7083 Hollywood Blvd., Suite 180
(Address)
Los Angeles, CA
(City/State and Zip code)

For further information concerning this matter, please call:

Barbara Dang at (323) 962-8600
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration 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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2010 SEP 30 PM 12:48

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. SIGN LANGUAGE RESOURCES 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. _____

(FEI number, if applicable)

4. MAY 17, 1990

(Date of incorporation)

5. perpetual

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

6. _____

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

7. 1607 Route 300, Newburgh, NY 12550

(Principal office address)

1607 Route 300, Newburgh, NY 12550

(Current mailing address)

8. Any and all lawful purposes

(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: United States Corporation Agents, Inc.

Office Address: 13302 Winding Oaks Blvd., Suite A

Tampa,

(City)

Florida 33688

(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) Jacob Varghese, VP, on behalf of United States Corporation Agents, Inc.

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:

FILED
2010 SEP 30 PM 12:48
SECRETARY OF STATE
DIVISION OF CORPORATE

FILED
SECRETARY OF STATE
DIVISION OF CORPORATE

2010 SEP 30 PM 12:48

A. DIRECTORS:

Chairman: Kathleen P Pilus

Address: 533 Rock Cut Road, Walden, NY 12586

Vice Chairman: Mary MacLean

Address: 6 Hamilton Avenue, Croton-On-Hudson, NY 10520

Director: Kathleen P Pilus

Address: 533 Rock Cut Road, Walden, NY 12586

Director: Mary MacLean

Address: 6 Hamilton Avenue, Croton-On-Hudson, NY 10520

B. OFFICERS

President: Kathleen P Pilus

Address: 533 Rock Cut Road, Walden, NY 12586

Vice President: _____

Address: _____

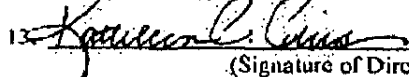
Secretary: Kathleen P Pilus

Address: 533 Rock Cut Road, Walden, NY 12586

Treasurer: Kathleen P Pilus

Address: 533 Rock Cut Road, Walden, NY 12586

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. Kathleen P Pilus, president

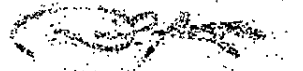
(Typed or printed name and capacity of person signing application)

**State of New York
Department of State } ss:**

I hereby certify, that the Certificate of Incorporation of SIGN LANGUAGE RESOURCES INC. was filed on 05/17/1990, 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.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 24th day of September
two thousand and ten.*


Daniel Shapiro
First Deputy Secretary of State

201009270140 * 10

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2010 SEP 30 PM 12:48