F10000004707

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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MRD
10/27

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: CAL Investigations 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:

JENNIFER T. CALNAN
(Name of Person)

CAL Investigations Inc.
(Firm/Company)

1689 Rte 22 · Suite 3
(Address)

Brewster N.Y. 10509
(City/State and Zip code)

For further information concerning this matter, please call:

JENNIFER T. CALNAN at (845) 279·4471
(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. CAL INVESTIGATIONS, 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. 263501194
(FEI number, if applicable)

4. SEPT 29 2008
(Date of incorporation)

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

6. No business to date
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1689 RT 22 SUITE 8 BREWSTER NY 10509
(Principal office address)

CAL INVESTIGATIONS INC P.O. BOX 172 BREWSTER NY 10509
(Current mailing address)

8. INVESTIGATIONS FOR WORKERS COMP, INSURANCE & PRIVATE SECTOR.
(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 M CALNAN

Office Address: 11419 S.W. NORTHLAND DRIVE

PORT SAINT LUCIE, Florida 34987
(City) (Zip code)

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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.

John M Calnan
(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

Chairman: JOHN D CALNAN

Address: 1689 RT 22 BREWSTER NY 10509

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Vice Chairman: JOHN M CALNAN

Address: 1689 RT 22 BREWSTER NY 10509

Director: JOHN M CALNAN

Address: 1689 RT 22 BREWSTER NY 10509

Director: _____

Address: _____

B. OFFICERS

President: JOHN D CALNAN

Address: 1689 RT 22 BREWSTER NY 10509

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: JOHN M CALNAN

Address: 1689 RT 22 BREWSTER NY 10509

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. John M Calnan Treasurer
(Signature of Director or Officer listed in number 12 of the application)

14. JOHN M CALNAN TREASURER
(Typed or printed name and capacity of person signing application)

State of New York
Department of State } ss:

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I hereby certify, that the Certificate of Incorporation of CAL INVESTIGATIONS, INC. was filed on 09/29/2008, 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 14th day of October two thousand and ten.

First Deputy Secretary of State

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