F10000005483

. (1	Requestor's Name)
(,	Address)
. (,	Address)
. (1	City/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
. (1	Business Entity Name)
(1	Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:
No Cap	, <i>J</i>
	Office Use Only



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COVER LETTER

New Filing Section Division of Corporations
SUBJECT: ReSource Intermediaries, 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," or "Certificate of Good Standing" 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:
Elizabeth Harker
Name of Person
3H Agent Services, Inc.
Firm/Company
6 Clement Avenue
Address
Saratoga Springs, NY 12866
City/State and Zip code
peth.harker@3has.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Beth Harker at (518) 583 0639 Ext. 113
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 \$\ \text{Certificate of Status} \] \$78.75 Filing Fee & Certified Copy \] \$87.50 Filing Fee, Certified Copy \[\text{Certified Copy} \]

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.

(If name unavail	able in Florida, enter alternate corporate na	ame adopted for the purpose of transacting business in Florida)	
California		3. 76-0737760	
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)	
		5. perpetual	
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	
		ess in Florida, if prior to registration) 07.1502, F.S., to determine penalty liability)	
221 Main Street,	Suite 730, San Francisco, CA 94105		
·	(Principal office	address)	
221 Main Street,	Suite 730, San Francisco, CA 94105		
	(Current mailing	address)	
_			
		or country to be carried out in state of Florida)	
(Purpose(s) of corporation authorized in home state (or country to be carried out in state of Florida)	
(Purpose(s		•	
(Purpose(s) of corporation authorized in home state (•	
(Purpose(s Name and stree	of corporation authorized in home state of taddress of Florida registered agent:	•	
(Purpose(s Name and stree Name:	of corporation authorized in home state of taddress of Florida registered agent: 3H Agent Services, Inc. 1970 Otter Way	(P.O. Box NOT acceptable)	
(Purpose(s Name and stree Name:	of corporation authorized in home state of taddress of Florida registered agent: 3H Agent Services, Inc. 1970 Otter Way Palm Harbor	(P.O. Box NOT acceptable), Florida 34685	
(Purpose(s Name and stree Name: Office Address:	of corporation authorized in home state of taddress of Florida registered agent: 3H Agent Services, Inc. 1970 Otter Way Palm Harbor (City)	(P.O. Box NOT acceptable)	
(Purpose(s Name and stree Name: Office Address:	of corporation authorized in home state of taddress of Florida registered agent: 3H Agent Services, Inc. 1970 Otter Way Palm Harbor (City) gent's acceptance:	(P.O. Box NOT acceptable) , Florida 34685 (Zip code)	
(Purpose(s Name and stree Name: office Address: O. Registered as	of corporation authorized in home state of taddress of Florida registered agent: 3H Agent Services, Inc. 1970 Otter Way Palm Harbor (City) gent's acceptance: ed as registered agent and to accept services.	(P.O. Box NOT acceptable) , Florida \frac{34685}{(Zip code)} ervice of process for the above stated corporation at the p	
(Purpose(s Name and stree Name: ffice Address: O. Registered as a caving been names are agree to contact the care agree t	of corporation authorized in home state of taddress of Florida registered agent: 3H Agent Services, Inc. 1970 Otter Way Palm Harbor (City) gent's acceptance: ed as registered agent and to accept so application, I hereby accept the appoomply with the provisions of all statut	(P.O. Box NOT acceptable) , Florida \frac{34685}{(Zip code)} ervice of process for the above stated corporation at the pointment as registered agent and agree to act in this capacies relative to the proper and complete performance of my	
(Purpose(s Name and stree Name: Office Address: O. Registered appropriate to the street of the stre	of corporation authorized in home state of taddress of Florida registered agent: 3H Agent Services, Inc. 1970 Otter Way Palm Harbor (City) gent's acceptance: ed as registered agent and to accept so application, I hereby accept the appoon omply with the provisions of all statut with and accept the obligations of my	(P.O. Box NOT acceptable) , Florida \frac{34685}{(Zip code)} ervice of process for the above stated corporation at the pointment as registered agent and agree to act in this capacies relative to the proper and complete performance of my	
(Purpose(s Name and stree Name: Office Address: O. Registered appropriate the second street the second street the second street to control the second street the	of corporation authorized in home state of taddress of Florida registered agent: 3H Agent Services, Inc. 1970 Otter Way Palm Harbor (City) gent's acceptance: ed as registered agent and to accept so application, I hereby accept the appoomply with the provisions of all statut	(P.O. Box NOT acceptable) , Florida \frac{34685}{(Zip code)} ervice of process for the above stated corporation at the pointment as registered agent and agree to act in this capacies relative to the proper and complete performance of my	
(Purpose(s . Name and stree . Name: . Name: . Office Address: . O. Registered appropriate the control of the co	of corporation authorized in home state of taddress of Florida registered agent: 3H Agent Services, Inc. 1970 Otter Way Palm Harbor (City) gent's acceptance: ed as registered agent and to accept seapplication, I hereby accept the appoomply with the provisions of all statut with and accept the obligations of my 3H Agent Services, Inc.	(P.O. Box NOT acceptable) , Florida \frac{34685}{(Zip code)} ervice of process for the above stated corporation at the pointment as registered agent and agree to act in this capacies relative to the proper and complete performance of my	

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

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under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Peter Garvey Address: 1 State Street Plaza, 9th Floor New York, NY 10004 Vice Chairman: _ Address: _ Robert F. Kennedy Director: 221 Main Street, Suite 730 Address: San Francisco, CA 94105 Director: William Costantini 1 State Street Plaza, 9th Floor New York, NY 10004 **B. OFFICERS** President: Robert F. Kennedy Address: 221 Main Street, Suite 730, San Francisco, CA 94105 Vice President: Elizabeth Kernan and Kevin R. Marani Address: 221 Main Street, Suite 730, San Francisco, CA 94105 Secretary: William Costantini Address: 1 State Street Plaza, 9th Floor, New York, NY 10004 Treasurer: William Goldstein Address: 1 State Street Plaza, 9th Floor, New York, NY 10004 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. 14. William Costantini, Secretary

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

ReSource Intermediaries, Inc. Florida Department of State Statement of Directors

Additional Directors In	formation	Schedule:
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Name	Address
William Goldstein	1 State Street Plaza, 9 th Floor, New York, NY 10004

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

RESOURCE INTERMEDIARIES, INC.

FILE NUMBER:

C2519578

FORMATION DATE:

07/10/2003

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of December 09, 2010.

DEBRA BOWEN Secretary of State