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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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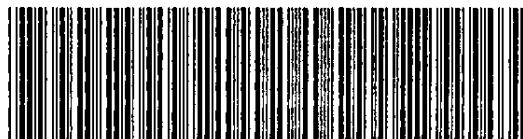
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE FLORIDA

MRB  
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## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** 2tor, 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:

Robert Cohen, CFO

Name of Person

2tor, Inc

Firm/Company

Pier 59, Suite 200

Address

New York, NY 10011

City/State and Zip code

rcohen@2tor.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Cohen

at ( 806 ) 486-1965

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 21, 2011

ROBERT COHEN, CFO  
2TOR, INC  
PIER 59, SUITE 200  
NEW YORK, NY 10011

SUBJECT: 2TOR, INC  
Ref. Number: W11000016062

We have received your document for 2TOR, INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

A brief description of the entity's nature of business must be included in the document.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap  
Regulatory Specialist II

Letter Number: 711A00006866

**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. 2tor, 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. Delaware 3. 26-2335939  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 4/2/08 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 3-15-2011  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. Pier 59, Suite 200, New York, NY 10011  
(Principal office address)  
Pier 59, Suite 200, New York, NY 10011  
(Current mailing address)

8. Educational Services  
(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: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301  
(City) (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.*

Corporation Service Company

By: Mary J. Werner

(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.

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TALLAHASSEE FLORIDA

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TALLAHASSEE FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: John Katzman

Address: 320 Central Park West - 19B  
New York, NY 10025

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Mark Chernis

Address: c/o 2tor, Inc  
59 Chelsea Piers, Suite 200, New York, NY 10011

Director: Jack Larson

Address: c/o 2tor, Inc  
59 Chelsea Piers, Suite 200, New York, NY 10011

B. OFFICERS

President: Christopher Paucek

Address: 711 Childs Point Road  
Annapolis, MD 21401

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: John Katzman

Address: 320 Central Park West 19B, New York, NY 10025

Treasurer: Robert Cohen, CFO

Address: 4 Stratford Ct. Warren, NJ 07059

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

13. \_\_\_\_\_

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. Robert Cohen, CFO/Treasurer

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

2tor, Inc  
Addendum to Florida Registration  
Additional Directors

Director: Tim Haley  
Address: c/o 2tor, Inc  
59 Chelsea Piers, Suite 200  
New York, NY 10011

Director: Greg Martin  
Address: c/o 2tor, Inc  
59 Chelsea Piers, Suite 200  
New York, NY 10011

Director: Phil Bronner  
Address: c/o 2tor, Inc  
59 Chelsea Piers, Suite 200  
New York, NY 10011

Director: Paul Maeder  
Address: c/o 2tor, Inc  
59 Chelsea Piers, Suite 200  
New York, NY 10011

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TALLAHASSEE FLORIDA

# Delaware

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "2TOR, 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 ELEVENTH DAY OF FEBRUARY, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "2TOR, INC." WAS INCORPORATED ON THE SECOND DAY OF APRIL, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.


AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.



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110144356

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 8554488

DATE: 02-11-11