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(Re	equestor's Name)	
(Ad	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bı	usiness Entity Nan	ne)
(B.	23me33 Emily Hum	
(5)		
(DC	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO:	New Filing Sec Division of Cor			
SUBJ	_{ECT:} Engaç	ge Partners Inc.		
	· · · · · · · · · · · · · · · · · · ·		tion - must include suffix	
Dear S	ir or Madam:			
"Certif	icate of Existence		for Authorization to Transact Standing" and check are subn siness in Florida.	
Please	return all corresp	ondence concerning this ma	atter to the following:	
Chris	stopher Edv	vards		
	•		e of Person	
Eng	age Partne	rs Inc.		
			Company	
68 8	South Servi	ce Road, Suite 10	0	
		A	ddress	
Melv	ille, NY 117	47		
			te and Zip code	
chrise	@engagesta	ff.com		
		E-mail address: (to be us	sed for future annual report no	otification)
For fur	ther information	concerning this matter, plea	se call:	
Chris	stopher Edw	ards at (631) 577-4036	
	Name of Person	at \	rea Code & Daytime Telepho	ne Number
	STREET/COU New Filing Sect Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations B Center Circle	MAILING AE New Filing Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction rporations
Enclos	ed is a check for t	the following amount:		
□\$7	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.

El number, if applicable) corp. will cease to exist or "perpetual o registration)	·")
corp. will cease to exist or "perpetual	·")
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registration)	
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out in state of Florida)	÷ .~
ptable)	725
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Tie	17.3
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	7 1747 Tout in state of Florida) Exptable) 3076 Zip code) the above stated corporation at the diagent and agree to act in this caper and complete performance of ed agent.

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 **Chairmans Christopher Edwards** Address: 9 Beacon Lane East Northport, NY 11731 Vice Chairman: Robert Deck Address: 7420 Wisteria Avenue Parkland FL, 33076 ______ tress: Director: Address: **B. OFFICERS** President: Christopher Edwards Address: 9 Beacon Lane, East Northport, NY 11731 Vice President: Robert Deck Address: 7420 Wisteria Avenue, Parkland FL, 33076 Secretary: Treasurer: __ Address: NOTE: If necessary, you may attach an adder dum 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. Chairman Preside 14. Christopher Edwards

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of ENGAGE PARTNERS INC. was filed on 02/21/2007, 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 06th day of July two thousand and eleven.

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First Deputy Secretary of State