

F11000004797

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

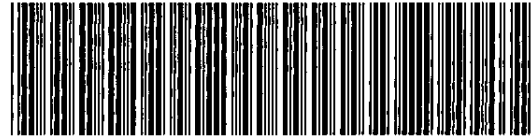
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700214354447

11/29/11--01021--004 **70.00

FILED

11 NOV 29 PM 1:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRD
11/30

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: PLASMA AIR INTERNATIONAL, 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:

LAWRENCE SUNSHINE

Name of Person

PLASMA AIR INTERNATIONAL, INC.

Firm/Company

35 MELROSE PLACE

Address

STAMFORD, CT 06902

City/State and Zip code

lsunshine@plasma-air.com

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

For further information concerning this matter, please call:

LAWRENCE SUNSHINE

Name of Person

at (203) 662-0800

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. PLASMA AIR INTERNATIONAL INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

PLASMA AIR
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. CONNECTICUT 3. 41-2239026
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 5/14/2007 5/11/2007 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. ~~1/1/00~~ UPON QUALIFICATION
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 35 MELROSE PLACE, STAMFORD, CT 06902
(Principal office address)

35 MELROSE PLACE, STAMFORD, CT 06902
(Current mailing address)

8. SALE OF BIPOLAR IONIZATION EQUIPMENT
(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: BRUCE FONTAINE

Office Address: 301 SW 27TH AVE

DELRAY BEACH, Florida 33445
(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.

Bruce A. Fontaine
(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.

FILED
11 NOV 29 PM 1:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: LAWRENCE SUNSHINE

Address: 35 MELROSE PLACE
STAMFORD, CT 06902

Vice Chairman: ROBERT ARBUCKLE

Address: 35 MELROSE PLACE
STAMFORD, CT 06902

Director: JOHN J. COLLINS

Address: 35 MELROSE PLACE
STAMFORD, CT 06902

Director: _____

Address: _____

B. OFFICERS

President: LAWRENCE SUNSHINE

Address: 35 MELROSE PLACE
STAMFORD, CT 06902

Vice President: _____

Address: _____

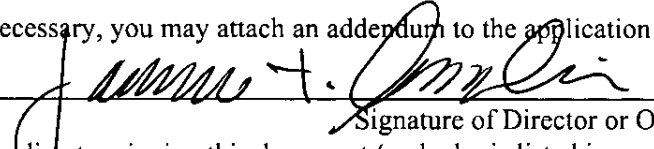
Secretary: JOHN J. COLLINS

Address: 35 MELROSE PLACE, STAMFORD, CT 06902

Treasurer: JOHN J. COLLINS

Address: 35 MELROSE PLACE, STAMFORD, CT 06902

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. LAWRENCE T. SUNSHINE - PRESIDENT

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

FILED

11 NOV 29 PM 1:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof,
DO HEREBY CERTIFY, that the certificate of incorporation of

PLASMA AIR INTERNATIONAL INC.

a domestic STOCK corporation, was filed in this office on May 11, 2007, a certificate of dissolution
has not been filed, the corporation has filed all annual reports, and so far as indicated by the records of
this office such corporation is in existence.



Secretary of the State

Date Issued: November 23, 2011

FILED
11 NOV 29 PM 1:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA