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Florida Department of State  
Division of Corporations  
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**Email Address:** \_\_\_\_\_

**FOREIGN PROFIT/NONPROFIT CORPORATION  
GLOBAL DYNAMICS, INC.**

|                       |         |
|-----------------------|---------|
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**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. Global Dynamics, Inc.

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

Global Dynamics International, Inc.

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

2. New Jersey

(State or country under the law of which it is incorporated)

3. 22-2709955

(FEI number, if applicable)

4. 3/24/86

(Date of incorporation)

5. Perpetual

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

6. N/A

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

7. 3201 NE 183rd St., Suite 2008, Aventura, FL 33160

(Principal office address)

3201 NE 183rd St., Suite 2008, Aventura, FL 33160

(Current mailing address)

8. Business consulting

(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: Greenspoon Marder, P.A.

Office Address: 100 W. Cypress Creek Road #700

Ft. Lauderdale

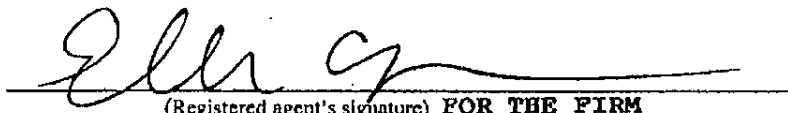
(City)

Florida 33309

(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.*



(Registered agent's signature) **FOR THE FIRM**

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

## A. DIRECTORS

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

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

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

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

Director: Varda A. GoodmanAddress: 3201 NE 183rd St., Suite 2008, Aventura, FL 33160Director: Neal R. GoodmanAddress: 3201 NE 183rd St., Suite 2008, Aventura, FL 33160

## B. OFFICERS

President: Neal R. GoodmanAddress: 3201 NE 183rd St., Suite 2008, Aventura, FL 33160Vice President: Varda A. GoodmanAddress: 3201 NE 183rd St., Suite 2008, Aventura, FL 33160Secretary: Varda A. GoodmanAddress: 3201 NE 183rd St., Suite 2008, Aventura, FL 33160Treasurer: Varda A. GoodmanAddress: 3201 NE 183rd St., Suite 2008, Aventura, FL 33160

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

13. Varda Goodman

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. Varda A. Goodman, Director

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

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**STATE OF NEW JERSEY  
DEPARTMENT OF THE TREASURY  
SHORT FORM STANDING**

**GLOBAL DYNAMICS, INC.**

0100292273

*I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on March 24, 1986.*

*As of the date of this certificate, said business continues as an active business in the State of New Jersey. Annual Reports are outstanding for the following year(s):*

*2011*

*I further certify that the registered agent and registered office are:*

*John Schieman  
35 Olde York Rd.  
Randolph, NJ 07869*



Certification# 123135535

IN TESTIMONY WHEREOF, I have  
hereunto set my hand and affixed my  
Official Seal at Trenton, this  
22nd day of February, 2012

A handwritten signature in black ink, appearing to read "Andrew P. Sidamon-Eristoff".

Andrew P. Sidamon-Eristoff  
State Treasurer

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Verify this certificate at  
[https://www1.state.nj.us/TYTR\\_StandingCert/JSP/Verify\\_Cert.jsp](https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp)