

F/2000000940

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H12000054997 3)))



H120000549973ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : INCORPORATING SERVICES FL
Account Number : I20050000052
Phone : (302) 531-0855
Fax Number : (850) 656-7953

RECEIVED
12 MAR - 1 PM 12:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FOREIGN PROFIT/NONPROFIT CORPORATION
RESTORATIVE TRAVEL INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

FILED
12 MAR - 1 AM 11:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K 03/02/12

Electronic Filing Menu

Corporate Filing Menu

Help

**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. RESTORATIVE TRAVEL 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. NEW YORK

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

3. 11-2780133

(FBI number, if applicable)

4. FEBRUARY 3, 1986

(Date of incorporation)

5. PERPETUAL

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

6. UPON REGISTRATION

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 8704 THIRD AVENUE, BROOKLYN, NY 11209

(Principal office address)

SAME ADDRESS AS ABOVE

(Current mailing address)

8. TRAVEL AGENCY

(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:

Madeleine Josephs

Office Address:

1331 South Federal Highway

Boynton Beach

(City)

Florida 33435

(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)

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
12 MAR - 1 AM 11:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Lucille Putzu

Address: 8904 16th Ave.

Brooklyn, NY 11214

Director: Concetta Longabardi

Address: 59 Abrahamson Rd.

Middletown, NY 10940

B. OFFICERS

President: Lucille Putzu

Address: 8904 16th Ave.

Brooklyn, NY 11214

Vice President: Concetta Longabardi

Address: 59 Abrahamson Rd.

Middletown, NY 10940

Secretary: Lucille Putzu

Address: same as above

Treasurer: Concetta Longabardi

Address: same as above

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

13. Lucille Putzu Pres.
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. LUCILLE PUTZU, PRESIDENT

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

FILED
12 MAR - AM 11:35
SECRETARY OF STATE
TALLAHASSEE FLORIDA

State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of RESTORATIVE TRAVEL INC. was filed on 02/03/1986, 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.

The Biennial Statement is past due.



201203010112 - 35

*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 29th day of February
two thousand and twelve.*

Daniel Shapiro
First Deputy Secretary of State

FILED
12 MAR -1 AM 11:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA