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To:

Division of Corporations

Fax Number

: (850) 617-6381

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-0821 Fax Number : (850)558-1515

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

Email Address:\_

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## FOREIGN PROFIT/NONPROFIT CORPORATION ABJ DISTRIBUTORS, 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.

ABJ DISTRIB	UTORS, INC.	
	rporation; must include "INCORPORATED,"	"COMPANY," "CORPORATION,"
*Inc.,* *Co.," *Co.	rp, "Inc," "Co," or "Corp.")	t .
		,
(If name unavaila	ble in Florida, onter alternate corporate name a	dopted for the purpose of transacting business in Florida)
DELAWARE	3.	80-0700496
(State or country u	nder the law of which it is incorporated)	(FEI number, if applicable)
February 28, 2	5.	Perpetual
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
Marc	h 9. 2012	
	(Date first transacted business in	
	·	02, F.S., to determine penalty liability)
10737 North G	reen Drive, Wellington, FL 33449	
	(Principal office addr	ess)
10737 North C	reen Drive, Wellington, FL 33449	
	(Current mailing addr	ress)
Any lawful pu		
(Purpose(s	of corporation authorized in home state or co	suntry to be carried out in state of Florida)
. Name and stree	t address of Florida registered agent: (P.O	D. Box NOT acceptable)
Name:	Corporation Service Company	
Name:	oo.po.co.co.co.co.co.co.co.co.co.co.co.co.co	
Office Address:	1201 Hays Street	
	Tallahassee	D. Box NOT acceptable)  Plorida 32301  (Zip code)
	(City)	(Zip code)
0.70.44		90
	gent's acceptance: od as registered agent and to accept servi	ce of process for the above stated corporation at the p
lesignated in this	application, I hereby accept the appointm	nent as registered agent and agree to act in this capac
		elative to the proper and complete performance of my
ına 1 am fanziliai	with and accept the obligations of my po	ssiion as registered agent.
	Corporation Service Company	JOHN H. PELLETIER
1	34: John H. Allete	ASST. VICE PRESIDENT
•	(Registered agent's signature)	

<sup>11.</sup> 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. Names and business addresses of officers and/or directors:

12 AUG 14 AMII: 26

12. Names and dustness addlesses of officers and/of directors.	witt: 5P
A. DIRECTORS	SECRETARY OF STATE TALLAHASSEE, FLORIDA
Chairman: Stuart Subotnick	THE MINSSEE. FLORIDA
Address: c/o Metromedia Company, 810 7th Avenue, 29th Floor, New York	, New York. 10019
Vice Chairman: Anita Subotnick	
Address: c/o Metromedia Company, 810 7th Avenue, 29th Floor, New York	, New York 10019
Director: Barbara Leber	
Address: c/o ABJ Distributors, Inc., 10737 North Green Drive, Wellington,	
Director:	
Address:	
B. OFFICERS	
President: Anita Subotnick	
Address: c/o Metromedia Company, 810 7th Avenue, 29th Floor, New York	New York 10019
	· · · · · · · · · · · · · · · · · · ·
Vice President: Barbara Leber	**************************************
Address: c/o ABJ Distributors, Inc., 10737 North Green Drive, Wellington,	
Address:	
Secretary: Barbara Leber	
	TT 22440
Address: c/o ABJ Distributors, Inc., 10737 North Green Drive, Wellington,	rl 33449
Treasurer: Anita Subotnick	XX XX 1 10010
Address: c/o Metromedia Company, 810 7th Avenue, 29th Floor, New York	k, New York 10019
NOTE: If necessary, you may attach an addendum to the application listing addi	tional officers and/or directors.
13. Daylogran Select Signature of Director or Officer	
the officer of unector signing this document (and who is fisted in humber 12 abo	
are true and that he or she is aware that false information submitted in a documen third degree felony as provided for in s.817.155, F.S.	t to the Department of State constitutes a

14. Barbara Leber, Vice President

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

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ABJ DISTRIBUTORS, 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 THIRTEENTH DAY OF AUGUST, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ABJ DISTRIBUTORS, INC." WAS INCORPORATED ON THE TWENTY-EIGHTH DAY OF FEBRUARY, A.D. 2011.

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.

4946415 8300

120930685

You may verify this certificate online at corp.delaware.gov/authver.shtml

AUTHENTICATION: 9776410

DATE: 08-13-12