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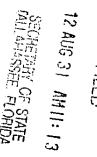
(Re	equestor's Name)	
(Ac	ldress)	
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(Cir	ty/State/Zip/Phone	e #) ·
PICK-UP	☐ WAIT	MAIL MAIL
(Ви	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 22, 2012

RALPH FORMATO 778 JAMAICA BLVD TOMS RIVER, NJ 08757

SUBJECT: V.A. TRANSPORTATION NETWORK FOUNDATION, INC.

Ref. Number: W12000043710

We have received your document for V.A. TRANSPORTATION NETWORK FOUNDATION, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Justin M Shivers Regulatory Specialist II New Filing Section

Letter Number: 712A00021568

COVER LETTER

TO:	New Filing Sect	ion			
10.	Division of Corp				
	Division of Corp	orations			
SUBJ	ECT:	V.A. Transportation Network Foundation, Inc.			
		Name of Corporation – must include suffix			
Dear S	ir or Madam:				
"Certif	icate of Existence",	n by Foreign Not for Profit Corporation for Authorization to Conduct its A or "Cerificate of Good Standing" and check are submitted to register the to conduct its affairs in Florida.			
Please	return all correspor	ndence concerning this matter to the following:			
	_	Ralph Formato, Director of Operations			
		Name of Person			
		V.A. Transportation Network Foundation, Inc.			
		Firm/Company			
	_				
	- with	778 Jamaica Boulevard			
	-	Address			
		Toms River, New Jersey 08757	-0		
		City/State and Zip Code		2 AUG 3 I	
		r.formato@vatnf.org	元	<u>6</u>	mry.
	E-mail	address: (to be used for future annual report notification)			
For fur	ther information co	ncerning this matter, please call:	OF STATE	*	
	Ralph Fo Name of F		3>	ယ	
	MAILING ADDINEW Filing Section Division of Corport P.O. Box 6327 Tallahassee, FL 32	n New Filing Section rations Division of Corporations Clifton Building	:		
Enclose	d is a check for the	following amount:			
II bła	dotatiketike [\$78.75 Filing Fee & S78.75 Filing Fee & S87.50 Filing Certificate of Status Certified Copy Certificate of S	Status &)	

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

	V.A. Iransport oration: must include the word "INCo age as will clearly indicate that it is coresent. "Company" or "Co." may no					
2. <u>(State or oou</u>	New Jersey Intry under the law of which it is inco November 17th, 2011 Date of Incorporation)	3	45-3824421			
(State or cou	miry under the law of which it is inco	orporated)	(FEI number, II applicable	e)		
4	November 17th, 2011	5. <u> rev</u>	rehal			
(1	Date of Incorporation)	(Duration: Y	'ear corp. will cease to exis	st or "perpetua	!")	
6.	lucted affairs in Florida if prior to regis	N/A				
(Date first cond	lucted affairs in Florida if prior to regis	tration. See sections 617.150	01 & 617.1502, F.S. to dete	rmine penalty i	liability.	.)
7	778 Jamaica Boulev	rard, Toms River, Ne (Principal office address)	ew Jersey 08757			
	778 Jamaica Boulev	ard, Toms River, Ne	w Jersey 08757			
8. To provio	le free transportation to our corporation authorized in home state	injured/disabled Milit or country to be carried or	tary Veterans/Missio	n Stateme	<u>nt</u>	
9. Name and str	cet address of Florida registered a	ngent: (P.O. Box <u>NOT</u> ac	cceptable)	SECR	12 AUG	
	eet address of Florida registered a	ngent: (P.O. Box <u>NOT</u> ac	cceptable)	SECHELH FALLAHAS	AUG	(
Name:		agent: (P.O. Box <u>NOT</u> ad	cceptable)	SECKELAAT OF S	AUG 3 !	
Name:	Howard Hartstein 1486A Skees Road	ngent: (P.O. Box <u>NOT</u> ac	·	SECKELANT OF STATE TALL MHASSEE FLORIDA	AUG	

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.

(Registered agent's signature)

12. Names and addresses of officers and/or directors: A. DIRECTORS Address: Vice Chairman:_____ Address: Director: Ralph Formato, Director of Operations Address: 778 Jamaica Boulevard Toms River, New Jersey 08757 Director: Howard Hartstein, Director of South Florida Address: 2060 Greenview Shores Boulevard, Unit 319 Wellington, Florida 33414 **B. OFFICERS** President: Michael Ingrassia Address: 2086 Maple View Court Scotch Plains, New Jersey 07076 Vice President: Address: Secretary: Address: Treasurer: Martin Chirico, CPA Address: 71 Hackensack Street, Wood Ridge, New Jersey 07075 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Ralph Formato, Director of Operations

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

STATE OF NEW JEKSET DEPARTMENT OF THE TREASURY SHORT FORM STANDING

VA TRANSPORTATION NETWORK FOUNDATION INC 0400453179

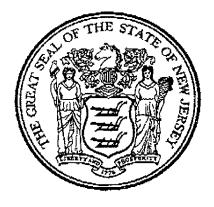
I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Non Profit Corporation was registered by this office on November 17, 2011.

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):

2012

I further certify the registered agent and registered office are:

Michael Ingrassia 2086 Maple View Court Scotch Plains, NJ 07076



Certificate Number: 125762463

Verify this certificate online at

http://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 17th day of August, 2012

Andrew P Sidamon-Eristoff State Treasurer

CRETAIN OF STA

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