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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
OF CORPORATIONS

12000037789 J

COVERILETTER

TO: New Filing Section Division of Corporations	
SUBJECT: J.B. Nottingham &Co Inc.	
Name of corporation - must include suffix	_
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact "Certificate of Existence," or "Certificate of Good Standing" and check are submabove referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
John Sclafani	
Name of Person	
J.B. Nottingham and Co. Inc	
Firm/Company	
75 Hoffman Lane	
Address	
Islandia, New York 1149	
City/State and Zip code	
johns@jbn-duranline.com	
E-mail address: (to be used for future annual report no	otification)
For further information concerning this matter, please call:	
John Sclafani _{at (} 631 ₎ 234-2002	
Name of Person Area Code & Daytime Telepho	ne Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle MAILING AD New Filing Section Division of Corporation of Corporat	ction rporations
Tallahassee, FL 32301	
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 &



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 27, 2012

JOHN SCLAFANI 75 HOFFMAN LN ISLANDIA, NY 11749

SUBJECT: J.B. NOTTINGHAM & CO., INC.

Ref. Number: W12000037789

We have received your document for J.B. NOTTINGHAM & CO., 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):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

Please return 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.

Diane Cushing
Regulatory Specialist II Supervisor

Letter Number: 612A00021873

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AUG 20 2012



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SEGRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

August 9, 2012

JOHN SCLAFANI 75 HOFFMAN LN ISLANDIA, NY 11749

SUBJECT: DURALINE DIVISION OF J.B. NOTTINGHAM & CO. INC

Ref. Number: W12000037789

We have received your document for DURALINE DIVISION OF J.B. NOTTINGHAM & CO. 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):

You failed to make the correction(s) requested in our previous letter.

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 accept our apology for failing to mention this in our previous letter.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please return 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.

Diane Cushing Regulatory Specialist II Supervisor

Letter Number: 212A00020661

Division of Corporations, P.O. ROY 6327, Tallahassaa, Florida 32314



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FLORIDA DEPARTMENT OF STATE Division of Corporations

July 17, 2012

RECEIVED

JUL 23 2012

JOHN SCLAFANI 75 HOFFMAN LN ISLANDIA, NY 11749

SUBJECT: DURALINE DIVISION OF J.B. NOTTINGHAM & CO. INC

Ref. Number: W12000037789

We have received your document for DURALINE DIVISION OF J.B. NOTTINGHAM & CO. 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):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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 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.

Jessica A Fason Regulatory Specialist II

Letter Number: 212A00019008

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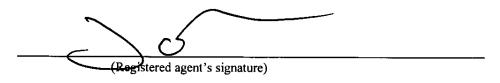
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

_{4.} <u>Ј. В. </u> 00	TTINGHAM & CO., INC.			
	corporation; must include "INCORPORATE Corp," "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION,"		
(If name unavail	able in Florida, enter alternate cornorate na	me adopted for the purpose of transacting business	in Floric	<u> </u>
	•		III PIOITO	ia)
2. New York	under the law of which it is incorporated)	3. <u>13-1544896</u>		
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)		
4. 4/24/h		5. <u>Terpetual</u>		
(Date	e of incorporation)	(Duration: Year corp. will cease to exist or "p	perpetual	")
6.				
		ss in Florida, if prior to registration)		
	(SEE SECTIONS 607.1501 & 607	7.1502, F.S., to determine penalty liability)		•
_{7.} 1731 Patte	rson Avenue Deland, Fla 32	724		
	(Principal office a	nddress)	ئ د	NSE SE
75 Hoffma	n Lane, Islandia, NY 11749	9	SÉ.	뎦
	(Current mailing a	address)	10	
			70	SAC E
8			무 유 유	OR OR
(Purpose(s	s) of corporation authorized in home state or	r country to be carried out in state of Florida)	: 30	
9. Name and stree	et address of Florida registered agent: (l	P.O. Box <u>NOT</u> acceptable)	0	5
Name:	John Sclafani			
Office Address:	1731 Patterson Ave			
	Deland	, Florida 32724		
	(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.



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.

12. Names and business addresses of officers and/or directors:		
A. DIRECTORS		
Chairman:		 , ,
Address:		
Vice Chairman:		
Address:		·
D'		
Director:		
Address:		
Director:		
Address:		
	·	
B. OFFICERS		
President: John Sclafani		
Address: 25 Marge Lane, Calverton NY 11933		
Vice President:		9
Address:	SE	SEC
		유지가
Sacratam	<u> </u>	SOR PROPERTY.
Secretary:		F ST
Address:	30	THE SE
Treasurer:		err
Address:		
NOTE: If necessary, you may attach an addendum to the application listing additional office	rs 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 the are true and that he or she is aware that false information submitted in a document to the Department degree felony as provided for in s.817.155, F.S.	hat the facts stated artment of State con	herein stitutes a
14. John Sclafani		
(Typed or printed name and capacity of person signing application)	····-	· · · · · · · · · · · · · · · · · · ·

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of J. B. NOTTINGHAM & CO., INC. was filed on 04/24/1946, fixing the duration as perpetual, 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.



SECRETARY OF SIATIONS
BIVISION OF CORPORATIONS
12 SEP 10 PM 3: 30

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 23rd day of July two thousand and twelve.

First Deputy Secretary of State