F17000004876

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
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12 HOV 30 PH 3: 25 SECRETARY OF STATE BALLAHASSEE, FLORING

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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 27, 2012

E. HAROLD GASSENHEIMER 142 SANS SOUCI DR CORAL GABLES, FL 33133

SUBJECT: POWERS DEVICE TECHNOLOGIES, INC.

Ref. Number: W12000059062

We have received your document for POWERS DEVICE TECHNOLOGIES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

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: 712A00028159

Powers Device Technologies, Inc. 142 Sans Souci Drive Coral Gables, FL 33133 Tel: 305 978 5602 Email: hg@littlebanc.com

December 4, 2012

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314 Attn: Justin Shivers

Dear Justin,

I am an officer and director of Powers Device Technologies, Inc. and am writing after speaking this morning with Thomas of your office. The purpose is to correct the rejected application for this company as stated in your letter to me of November 27, 2012.

Please accept this as a name release letter for the prior name Powers Device Technologies, Inc. filed under F11000001660 in your registry. We are the owners of that prior name. That company was administratively dissolved and we have no intention to reinstate the dissolved company.

The current Company is a Delaware Corporation as can be seen from the application. We would like to release the above name to ourselves to use in connection with this application by the foreign (Delaware) corporation to transact business in Florida.

Please feel free to contact me for anything else you may need to complete this request. Thank you very much for your assistance and I commend Thomas for his rapid understanding of our situation and clear direction on how to resolve this matter.

Sincercly,

E. Harold Gassenheimer, Director and CFO

COVER LETTER

•			
TO: New Filing Section Division of Corporations			
SUBJECT: Powers Device Tech	hnologies, Inc.		
	ation - must include suffix		
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact but	Standing" and check are submit		
Please return all correspondence concerning this m	atter to the following:		
E. Harold Gassenheimer			
	e of Person		
Powers Device Technologie	es, Inc.		
	Company		
142 Sans Souci Drive			
	Address		
Coral Gables, FL 33133			
•	ate and Zip code		
hg@littlebanc.com		E - A - A	
E-man address: (to be u	sed for future annual report noti	neation) RALL	
For further information concerning this matter, plea	ase call:	SEUTE TAHY	
E. Harold Gassenheimer at (30	5 ₁ 978 5602		
	rea Code & Daytime Telephone	Number FLORIDA	Į.
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADD New Filing Section Division of Corpo P.O. Box 6327 Tallahassee, FL	RESS: on orations	as s
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 & Certified Copy	

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.

	VICE echnologies, Inc. orporation; must include "INCORPORAT	ED	" "COMPANY " "COPPORATION"		_	
"Inc.," "Co.," "C	orp," "Inc," "Co," or "Corp.")	ED,	""COMPANY," "CORPORATION,"			
(If name unavail	able in Florida, enter alternate corporate na	me	adopted for the purpose of transacting business	s in Florida	i)	
_{2.} Delaware		3.	45-0621313	•		
(State or country	under the law of which it is incorporated)	-	(FEI number, if applicable)		_	
4. March 14,	2011	5.	Perpetual			
(Date	of incorporation)		(Duration: Year corp. will cease to exist or	'perpetual")	,	
6. <u>June 1, 20</u>					_	
			1 Florida, if prior to registration) 502, F.S., to determine penalty liability)			
₇ 111 Natur			06, St., St. Augustine, FL 3	32090		
,. <u></u> ,	(Principal office			<u> </u>	-	
142 Sans	Souci Drive, Coral G	ab	les, FL 33133			
	(Current mailing				_	
Catabliab	ad affica in Flavida		·			
· · — —	ed office in Florida		651	<u> </u>	- 2	
(Purpose(s) of corporation authorized in home state o	rcc	untry to be carried out in state of Florida)	建 高	AOR	
9. Name and stree	t address of Florida registered agent: (P.C	Box NOT acceptable)	经验	30	
Name:	E. Harold Gassenheim	e			PM	巴巴巴
Office Address:	142 Sans Souci Drive			LOHI LOHI	ယ္ . 2	
	Coral Gables		, Florida 33133	¥mi	25	
	(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.

(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.

12. Names and business addresses of officers and/or directors:		
A. DIRECTORS		
Chairman: P. Kathleen Lovell		
Address: 260 N. Bartram Trail		
St Johns, FL 32259		
Vice Chairman:		
Address:		
Director: E. Harold Gassenheimer		
Address: 142 Sans Souci Drive, Coral Gables, FL 33133		
Director: Michael Margolies		
Address: 16 Spanish River Drive		
Ocean Ridge, FL 33435		
B. OFFICERS		
President: P. Kathleen Lovell		
Address: 260 N. Bartram Trail, St. Johns, FL 32259		
	7,2,	<u> </u>
Vice President:	A 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	သ
Address:	<u> </u>	<u> </u>
·	STAL ORIE	<u>ယ</u> ———
Secretary: E. Harold Gassenheimer	¥mi	<u>က</u>
Address: 142 Sans Souci Drive, Coral Gables, FL 33133		•. •
Treasurer: E. Harold Gassenheimer		
Address: 142 Sans Souci Drive, Coral Gables, FL 33133		
NOTE: If necessary, you may attach an addendum to the application listing additional officers	and/or directors.	
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 Depart third degree felony as provided for in s.817.155, F.S. E. Harold Gassenheimer. CFO	at the facts stated tment of State cor	herein istitutes a

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

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "POWERS DEVICE TECHNOLOGIES, 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 NINTH DAY OF

NOVEMBER, A.D. 2012.

12 NOV 30 PH 3: 25
SECRETARY OF STATE
TALL AHASSES STORMS

4953097 8300

121160601

AUTHENTICATION: 9976858

DATE: 11-09-12

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