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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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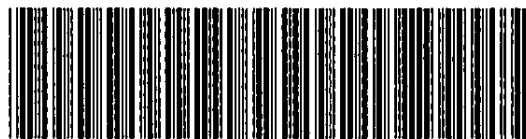
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/09/12--01008--023 **78.75

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12-52030
505



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 10, 2012

MARK GRAMCKO
1531 S WASHINGTON AVE
PISCATAWAY, NJ 08854

SUBJECT: ARBEE ASSOCIATES
Ref. Number: W12000052030

We have received your document for ARBEE ASSOCIATES and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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: 212A00025055

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Arbee Associates

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Mark Gramcko

Name of Person

Arbee Associates

Firm/Company

1531 South Washington Ave.

Address

Piscataway, NJ 08854

City/State and Zip code

vmarron@arbee.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Gramcko

Name of Person

at (732) 424-3849

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

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TALLAHASSEE, FLORIDA

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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.

1. **Arbee Associates 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 Jersey**

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

3. **22-2002596**

(FEI number, if applicable)

4. **2/1/1973**

(Date of incorporation)

5. **perpetual**

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

6. **11/01/2012**

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **1531 South Washington Avenue Piscataway NJ 08854**

(Principal office address)

Same

(Current mailing address)

8. **Place orders for office furniture for NJ companies with locations in FL**

(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: **NRAI Services Inc**

Office Address: **515 East Park Avenue**

Tallahassee

(City)

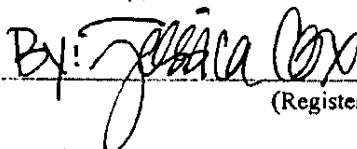
Florida **32301**

(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.

NRAI SERVICES, INC.

By: 

Jessica Cox, Assistant Secretary

(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.

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TALLAHASSEE FLORIDA

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

A. DIRECTORS

Chairman: Howard Berkowitz

Address: 1531 South Washington Ave Piscataway NJ 08854

Vice Chairman: Nancy Berkowitz

Address: 9300 Gaiter Dr Gaithersburg MD 20877

Director: Ruth Berkowitz

Address: 1531 South Washington Ave Piscataway NJ 08854

Director: Ellen Berkowitz

Address: 1531 South Washington Ave Piscataway NJ 08854

B. OFFICERS

President: Nancy Berkowitz

Address: 9300 Gaiter Dr Gaithersburg MD 20877

Vice President: Ellen Berkowitz

Address: 1531 South Washington Ave Piscataway NJ 08854

Secretary: Ellen Berkowitz

Address: 1531 South Washington Ave Piscataway NJ 08854

Treasurer: Ruth Berkowitz

Address: 1531 South Washington Ave Piscataway NJ 08854

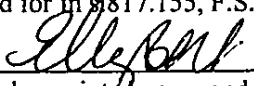
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____


Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms 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 817.155, F.S.

14. Ellen Berkowitz


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

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TALLAHASSEE FLORIDA

**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES**

ARBEE ASSOCIATES

1515800900

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on February 1, 1973.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

*Howard V Berkowitz
1531 South Washington Ave
Piscataway, NJ 08854*



Certification# 126506998

IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed my
Official Seal at Trenton, this
13th day of November, 2012

A handwritten signature in black ink, appearing to read "Andrew P. Sidamon-Eristoff".

Andrew P Sidamon-Eristoff
State Treasurer

SECRETARY OF STATE
TREASURY
ARBEESSE FLORENDA

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Verify this certificate at
https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp