

F13000000978

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

\_\_\_\_\_

Office Use Only



700243654167

01/22/13--01031--010 \*\*70.00

FILED  
13 MAR -4 PM 3:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

WB-4788

κ 03/05/13



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 15, 2013

RAFAEL ALVAREZ \*\*\* 2ND REJECTION \*\*\*  
ATAX CORPORATION  
1 EXECUTIVE BOULEVARD, SUITE 178  
YONKERS, NY 10701

SUBJECT: ATAX CORPORATION  
Ref. Number: W13000004788

We have received your document for ATAX CORPORATION and your check(s) totaling \$70.00. 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.

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.

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

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 413A00001844



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 24, 2013

RAFAEL ALVAREZ  
ATAX CORPORATION  
1 EXECUTIVE BOULEVARD, SUITE 178  
YONKERS, NY 10701

SUBJECT: ATAX CORPORATION  
Ref. Number: W13000004788

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

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4) or 608.502(4), F.S., this office is required to collect a civil penalty of \$1,000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

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.

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.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 413A00001844



**ATAX<sup>®</sup>**  
ACCOUNTING & FINANCIAL SERVICES

RECEIVED

2013 MAR -4 PM 1:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

February 24, 2013

Florida Department of State  
Division of Corporation  
P.O. Box 6327  
Tallahassee, FL 32314  
Attn: Thomas Chang, regulatory Specialist

RE: ATAX Application as Foreign Corporation

As per your request, please find the corrected Application of ATAX as a foreign corporation to transact business in the State of Florida.

Thank you for your attention. If you have any questions, do not hesitate to contact me at the number listed bellow or via email to [ralvarez@atax.com](mailto:ralvarez@atax.com).

Sincerely,

Rafael Alvarez, President & CEO

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** ATAX CORPORATION

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:

RAFAEL ALVAREZ

Name of Person

ATAX CORPORATION

Firm/Company

1 EXECUTIVE BOULEVARD, SUITE 178

Address

YONKERS, NY 10701

City/State and Zip code

RALVAREZ@ATAX.COM

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

For further information concerning this matter, please call:

RICHARD MORRIS

Name of Person

at ( 914 ) 920-5060

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

**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. **ATAX CORPORATION**

(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 YORK 3. 40-0569452  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. JUNE 14, 2012 5. "PERPETUAL"  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. NO APPLICABLE  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. ONE EXECUTIVE BLVD, SUITE 178, YONKERS, NY 10701  
(Principal office address)

ONE EXECUTIVE BLVD, SUITE 178, YONKERS, NY 10701  
(Current mailing address)

8. TAX PREPARATION AND RELATED SERVICES  
(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: CRISTINA GALLO

Office Address: 6295 CURRY FORD ROAD APT 156

ORLANDO, FL, Florida 32822  
(City) (Zip code)

FILED  
13 MAR -4 PM 3:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: RAFAEL ALVAREZ

Address: 94 WEST 225 STREET, SUITE 178  
BRONX, NY 10463

Vice Chairman: GLADYS ALVAREZ

Address: 122 LOCKWOOD ROAD, CORTLAND MINOR, NY 10567

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

FILED  
13 MAR -4 PM 3:37  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**B. OFFICERS**

President: RAFAEL ALVAREZ

Address: 94 WEST 225 STREET, SUITE 178  
BRONX, NY 10463

Vice President: GLADYS ALVAREZ

Address: 122 LOCKWOOD ROAD, CORTLAND MINOR, NY 10567

Secretary: RAFAEL ALVAREZ

Address: 94 WEST 225 STREET, SUITE 178 BRONX, NY 10463

Treasurer: GLADYS ALVAREZ

Address: 122 LOCKWOOD ROAD, CORTLAND MINOR, NY 10567

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

13. \_\_\_\_\_

Signature of Director or Officer

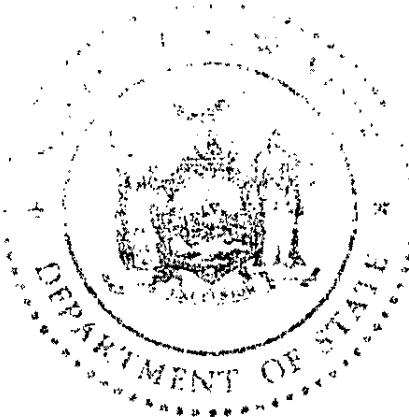
The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. RAFAEL ALVAREZ, PRESIDENT

(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 ATAX CORPORATION was filed on 06/14/2012, with perpetual duration, 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.



**FILED**  
13 MAR -4 PM 3:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

\*\*\*

*WITNESS my hand and the official seal  
of the Department of State at the City of  
Albany, this 07th day of February two  
thousand and thirteen.*

A handwritten signature in dark ink, appearing to read "Neil H. ...". The signature is fluid and cursive, written over a light background.

*First Deputy Secretary of State*