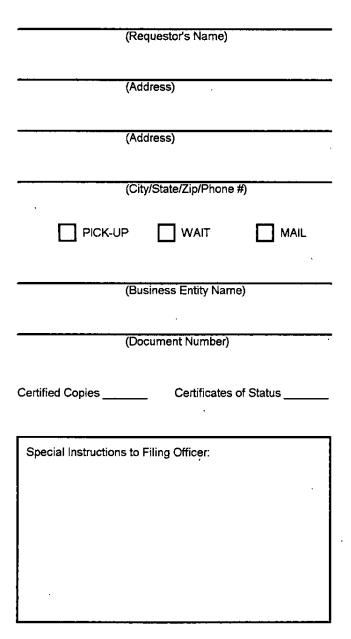
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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 7, 2013

NANETTE ABRAHAM 3724 47TH STREET CT NW GIG HARBOR, WA 98335

SUBJECT: ABRAHAM & CO., INC.

Ref. Number: W13000013507

13 MAR 25 AH II: 07
SECRETARY OF STATE

RECEIVE

We have received your document for ABRAHAM & CO., 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):

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 entity's date of incorporation/organization must be listed in the document.

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.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 313A00005476

13 MAR 25 PH 4: 58

#### 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. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION." "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") Abraham Securities Conportation
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (State or country under the law of which it is incorporated)

(FEI number, if applicable) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 47+h St C+ NW - 919 Harbon, WA 98335 (Current mailing address) Securities Shokerage.

(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) REGISTERED AGENT SOLUTIONS, INC. Name: 155 Office Plaza Dr. Suite A Office Address: Tallahassee (City) 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. Art Flores, Asst. Secretary (egistered 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 SECRETARY OF STATE Chairman: · Address: \_\_\_\_\_\_\_\_ 13 MAR 25 PM 4: 59 Vice Chairman: Address: \_\_\_\_\_ Address: Director: \_ Address: \_\_ **B. OFFICERS** President: Kye A. Abraham Address: 3724 4744 St Ct NW - 919 Harbor, WA 98335 Vice President: Address: \_\_ Secretary: NaneHe K. Abraham Address: 3724 474h St Ct NW gig Harbor, WA 983: 253 85 Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. K. Stapan 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. (Typed or printed name and capacity of person signing application)

## UNITED STATES OF AMERICA The State of Was Secretary of State Washington

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

#### CERTIFICATE OF EXISTENCE/AUTHORIZATION OF ABRAHAM & CO., INC.

I FURTHER CERTIFY that the records on file in this office show that the above named Profit Corporation was formed under the laws of the State of WA and was issued a Certificate Of Incorporation in Washington on 7/29/1982.

I FURTHER CERTIFY that as of the date of this certificate, ABRAHAM & CO., INC. remains active and has complied with the filing requirements of this office.

Date: February 15, 2013

UBI: 600-646-493

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Kim Wyman, Secretary of State

