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(Requestor's Name)

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(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



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06/12/13--01008--021 \*\*70.00

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 13, 2013

LINDA MARCELLO  
SALTER MCGOWAN SYLVIA & LEONARD, INC.  
321 SOUTH MAIN STREET, SUITE 301  
PROVIDENCE, RI 02903

SUBJECT: MARINOSCI LAW GROUP, P.C.  
Ref. Number: W13000034462

We have received your document for MARINOSCI LAW GROUP, P.C. 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.

The only acceptable words for designation as a professional association are PROFESSIONAL ASSOCIATION, P.A., and CHARTERED.

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.

Maryanne Dickey  
Regulatory Specialist II

Letter Number: 513A00014928

## COVER LETTER

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

**SUBJECT:** Marinosci Law Group, P.C.

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:

Linda Marcello, Paralegal

Name of Person

Salter McGowan Sylvia & Leonard, Inc.

Firm/Company

321 South Main Street, Suite 301

Address

Providence, RI 02903

City/State and Zip code

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

For further information concerning this matter, please call:

Arthur J. Leonard, Esq. at ( 401 ) 274-0300

Name of Person

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:

- |  |  |   |   |
|--|--|---|---|
| <input checked="" type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|--|--|---|---|

MLG, P.C.  
100 W. Cypress Creek Road  
Suite 1045  
Ft. Lauderdale, FL 33309

May 22, 2013

State of Florida  
Secretary of State  
New Filing Section  
Division of Corporations  
P.o. Box 6327  
Tallahassee, FL 32314

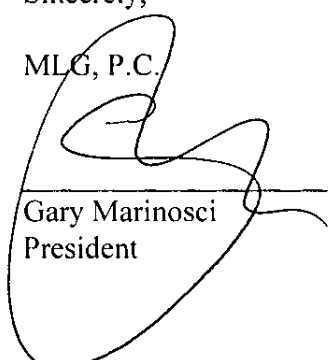
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dear Sir/Madam:

I, the undersigned, on behalf of MLG, Inc., hereby consent to the use of the name "Marinosci Law Group, P.C." or any similar variation thereof, by Marinosci Law Group, P.C. or Gary Marinosci.

Sincerely,

MLG, P.C.

  
\_\_\_\_\_  
Gary Marinosci  
President

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. Marinosci Law Group, P.C., P.A.

(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. Rhode Island

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

3. 05-0518463

(FEI number, if applicable)

4. 1/2/01

(Date of incorporation)

5. perpetual

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

6. \_\_\_\_\_

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

7. 100 W. Cypress Creek Road, Suite 1045, Ft. Lauderdale, FL 33309

(Principal office address)

100 W. Cypress Creek Road, Suite 1045, Ft. Lauderdale, FL 33309

(Current mailing address)

8. Rendering specific professional services as attorneys.

(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: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation

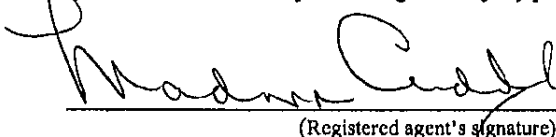
(City)

, Florida 33324

(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)

**Madonna Cuddihy**  
**Special Assistant Secretary**

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.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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12. Names and business addresses of officer's and/or directors:

**A. DIRECTORS**

Chairman: \_\_\_\_\_

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

Vice Chairman: \_\_\_\_\_

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

Director: Gary Marinosci

Address: 100 W. Cypress Creek Road, Suite 1045

Ft. Lauderdale, FL 33309

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

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

**B. OFFICERS**

President: Gary Marinosci

Address: 100 W. Cypress Creek Road, Suite 1045

Ft. Lauderdale, FL 33309

Vice President: \_\_\_\_\_

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

Secretary: \_\_\_\_\_

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

Treasurer: \_\_\_\_\_

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

**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. Gary D. Marinosci, President

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



State of Rhode Island and Providence Plantations

A. Ralph Mollis

Secretary of State

Certification Number: 13050037110

The office of the Secretary of State of the State of Rhode Island and Providence Plantations,  
HEREBY CERTIFIES, that

**MARINOSCI LAW GROUP, P.C.**

a Rhode Island corporation, filed original articles of incorporation in this office on

January 02, 2001

Effective

January 02, 2001

IT IS FURTHER CERTIFIED that as of this date said corporation is duly organized and existing  
under and by virtue of the laws of the State of Rhode Island and is in good standing according  
to the records of this office.

SIGNED AND SEALED ON

Tuesday, May 14, 2013

*A. Ralph Mollis*

Secretary of State

*Debra Antonelli*

Authorized Agent

