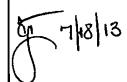
(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	cy/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL.	
(Bu	siness Entity Nar	me)	
(Do	ocument Number)		
Certified Copies	Certificates of Status		
Special Instructions to	Filing Officer:		

Office Use Only



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COVER LETTER

TO: New Filing Sec Division of Co					
	TTT STERN GROUP, INC	.			
SUBJECT:	Name of corporation	on - must include suffix			-
Dear Sir or Madam:					
"Certificate of Existence	tion by Foreign Corporation force," or "Certificate of Good Standard Corporation to transact busing	anding" and check are sub			
Please return all corresp	oondence concerning this matt	er to the following:			
KELLI PULLER					
	Name o	f Person			-
HIQ CORPORATI	E SERVICES, INC.				_
	Firm/Co	mpany			-
715 ST. PAUL ST	REET				_
BALTIMORE, ME	Add 21202	ress			
		and Zip code	· -		_
kelli@hiq-agents.	•	•			
	E-mail address: (to be used	for future annual report n	otification)		-
For further information	concerning this matter, please	call:			
Kelli Puller 800 564-5300		=	± 1≤2		
Name of Perso		Area Code & Daytime Telephone Number		3 JUL 12	SION OF C
New Filing Sec Division of Cor Clifton Buildin 2661 Executive Tallahassee, FL	rporations g : Center Circle	MAILING AI New Filing Sec Division of Co P.O. Box 6327 Tallahassee, FI	ction rporations	64:II WA	Y OF STATE CORPORATIONS
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 Filin Certificate Certified C	of Status	i &

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.

l •	STERN GROUP, INC.		
	orporation; must include "INCORPORATEI orp," "Inc," "Co," or "Corp.")	O," "COMPANY," "CORPORATION,"	
46			
NEW YOR	·	e adopted for the purpose of transacting business in Flori	da)
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)	
04/14/195	4	5. PERPETUAL	
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetua	al")
	(Date first transacted business (SEE SECTIONS 607,1501 & 607	in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	
420 LEXING	STON AVENUE, SUITE 2700, NE	W YORK, NY 10170	
	(Principal office as	idress)	
420 LEXING	STON AVENUE, SUITE 2700, NE	W YORK, NY 10170	
	(Current mailing ac	ddress)	
INSURANC	E BROKERAGE.		_ =
(Purpose(s) of corporation authorized in home state or	country to be carried out in state of Florida)	2. S
. Name and stree	et address of Florida registered agent: (I	P.O. Box NOT acceptable)	3 3
Name:	TRAC - THE REGISTERED AGENT COM		5 CO
office Address:	1574 VILLAGE SQUARE BLVD, SUI	ΓΕ 100)RPORATIO
	TALLAHASSEE	, Florida	: 19
	(City)	(Zip code)	7

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.

Hufuuk By: Kelli Puller, Vice President
(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: FILED SECRETARY OF STATE A. DIRECTORS DIVISION OF CORPORATIONS SEE ATTACHED Chairman: _ 13 JUL 12 AM 11: 49 Address: ______ Vice Chairman: Address: Director: ___ Address: _____ Director: __ Address: ____ **B. OFFICERS** President: __ SEE ATTACHED Address: _____ Vice President: Secretary: ______ Address: Address: ____ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Charles R. Johns 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. ('WIYIES R. JOHNSON, Jr President

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

FILED SEGRETARY OF STATE DIVISION OF CORPORATIONS

13 JUL 12 AMII: 49

Officers and Directors of DeWitt Stern Group, Inc.

DIRECTOR:

Jolyon F. Stern Chairman 420 Lexington Avenue, Suite 2700, New York, NY 10170

OFFICERS:

Jolyon F. Stern
CEO

420 Lexington Avenue, Suite 2700, New York, NY 10170
Charles R. Johnson, Jr.
President/COO

Kevin Walker
Treasurer

420 Lexington Avenue, Suite 2700, New York, NY 10170
420 Lexington Avenue, Suite 2700, New York, NY 10170
420 Lexington Avenue, Suite 2700, New York, NY 10170
420 Lexington Avenue, Suite 2700, New York, NY 10170

Stephen Pincus Senior Vice President

Secretary

420 Lexington Avenue, Suite 2700, New York, NY 10170

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of DEWITT STERN GROUP, INC. was filed on 04/14/1954, under the name of DEWITT STERN, GUTMANN & CO., INC., fixing the duration as perpetual, 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.

A Certificate of Amendment DEWITT STERN, GUTMANN & CO., INC., changing its name to DEWITT STERN GROUP, INC., was filed 04/22/1994.



of the Department of State at the City of Albany, this 21st day of June two thousand and thirteen.

Witness my hand and the official seal

Daniel Shapiro

Special Deputy Secretary of State

201306240269 * 30

SECRETARY OF STATE DIVISION OF CORPORATIONS