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(Requestor's Name)

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

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

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

☐ PICK-UP

☐ WAIT

☐ MAIL

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

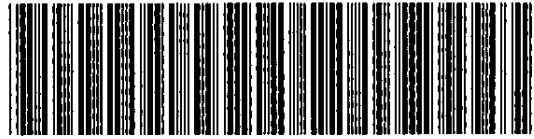
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Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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# GALLAGHER, BRIODY & BUTLER

COUNSELLORS AT LAW  
PRINCETON FORRESTAL VILLAGE  
155 VILLAGE BOULEVARD  
SUITE 201  
PRINCETON, NEW JERSEY 08540

(609) 452-6000  
FAX: (609) 452-0090

KEVIN M. BRIODY  
MARTIN J. CONROY  
JONATHAN M. GRISCHUK\*  
DEBORAH L. CARROLL  
COURTENAY C. HANSEN\*  
WILLIAM H. QUIRK, III\*

December 24, 2013

\* ALSO ADMITTED IN NY  
□ ALSO ADMITTED IN NY,  
DC AND CT

## VIA FEDERAL EXPRESS

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

**Re: Northeast Limited, Inc.**


Dear Sir/Madam:

On behalf of Northeast Limited, Inc., enclosed please find the following documentation in connection with such entity's filing of an application to transact business in the State of Florida:

1. Cover letter;
2. Application by Foreign Corporation for Authorization to Transact Business in Florida;
3. Certificate of Good Standing; and
4. Check in the amount of \$78.75 made payable to "Florida Department of State".

For our files, if you could kindly sign and return the enclosed copy of this letter acknowledging receipt of the enclosed documents to the attention of the undersigned in the enclosed self-addressed, postage-prepaid envelope, it would be much appreciated. Please do not hesitate to contact the undersigned at (609)452-6000 should you require any additional information. Thank you.

Very truly yours,

  
Martin J. Conroy

Enclosures

The undersigned hereby acknowledges receipt of the documents described above.

By: \_\_\_\_\_  
Name: \_\_\_\_\_  
Title: \_\_\_\_\_

Dated: \_\_\_\_\_

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## COVER LETTER

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

**SUBJECT:** Northeast Limited, Inc.

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:

Martin J. Conroy

Name of Person

Gallagher, Briody & Butler

Firm/Company

155 Village Boulevard, Suite 201

Address

Princeton, New Jersey 08540

City/State and Zip code

carywische@gmail.com

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

For further information concerning this matter, please call:

Martin J. Conroy

Name of Person

at ( 609 ) 452-6000

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 type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certificate of Status | <input checked="" type="checkbox"/> \$78.75 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee,<br>Certificate of Status &<br>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. **Northeast Limited, 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. **22-3593816**

(FEI number, if applicable)

4. **June 25, 1998**

(Date of incorporation)

5. **perpetual**

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

6. **N/A**

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

7. **309 North Willow Street, Trenton, NJ 08618**

(Principal office address)

**309 North Willow Street, Trenton, NJ 08618**

(Current mailing address)

8. **All lawful purposes**

(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: **Cary Wische**

Office Address: **19 Bristol Lane**

**Boynton Beach**

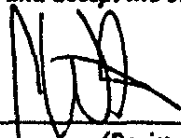
(City)

, Florida **33436**

(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)

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

**A. DIRECTORS**

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

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

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

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

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

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

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

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

**B. OFFICERS**

President: Cary Wische

Address: 19 Bristol Lane

Boynton Beach, FL 33436

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. Cary Wische, President

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

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DIVISION OF CORPORATIONS

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**STATE OF NEW JERSEY  
DEPARTMENT OF THE TREASURY  
SHORT FORM STANDING**

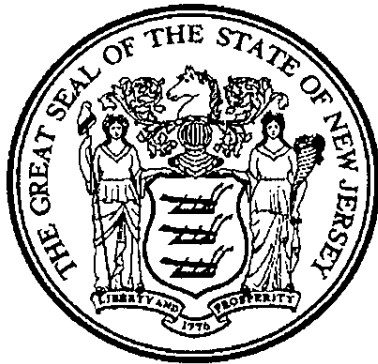
**NORTHEAST LIMITED, INC.**  
0100749899

*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 June 25, 1998.*

*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 the registered agent and registered office are:*

*Cary Wische  
309 North Willow Street  
Trenton, NJ 08618*



Certificate Number: 130545297

Verify this certificate online at

[http://www1.state.nj.us/TYTR\\_StandingCert/JSP/Verify\\_Cert.jsp](http://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp)

*IN TESTIMONY WHEREOF, I have  
hereunto set my hand and affixed  
my Official Seal at Trenton, this  
17th day of December, 2013*

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

*Andrew P Sidamon-Eristoff  
State Treasurer*