## F14000000184

| (Red                      | questor's Name)   |             |  |  |
|---------------------------|-------------------|-------------|--|--|
| (Ado                      | dress)            |             |  |  |
| (Add                      | dress)            |             |  |  |
| (City                     | //State/Zip/Phone | e #)        |  |  |
| PICK-UP                   | WAIT              | MAIL        |  |  |
| (Bus                      | siness Entity Nan | ne)         |  |  |
| (Document Number)         |                   |             |  |  |
| Certified Copies          | Certificates      | s of Status |  |  |
| Special Instructions to F | Filing Officer:   |             |  |  |
|                           |                   |             |  |  |
|                           |                   |             |  |  |
|                           |                   |             |  |  |

Office Use Only

B. VIS/14



800254913018

01/09/14--01033--004 \*\*79.00

14 JAN -9 PM 2: 15

January 3, 2014

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

RE: Certificate of Authorization

To Whom It May Concern:

Enclosed is the Application by a Foreign Corporation for Authorization to Transact Business in the State of Florida that was completed by our customer Joleb Contracting, Inc.

Once the application has been approved please forward evidence of the approval to the following address:

Joleb Contracting, Inc. Attn: Joel Jacobowitz P.O. Box 1159 Monsey, NY 10952

If there are any issues with the application or if you require any further information, kindly contact our Business Licensing division directly at the number or address listed below.

Thank you,

Amanda Gannon
Business Licenses, LLC
21 Robert Pitt Drive
Suite 310
Monsey, NY 10952
(845) 356-8390 Ext. 124
gannona@businesslicenses.com

## **COVER LETTER**

| TO:          | New Filing S<br>Division of C                  |  |   |  |
|--------------|--|--|---|--|
| SUBJ         | <sub>ECT:</sub> Jole                           | b Contracting, Inc                             | •   |  |
|              |  |  | oration - must include suffix   |  |
| Dear S       | ir or Madam:                                   |  |   |  |
| "Certif      | icate of Existe                                |  | on for Authorization to Transac<br>d Standing" and check are subr<br>business in Florida. |  |
| Please       | return all corre                               | espondence concerning this                     | matter to the following:  |  |
| Joel         | Jacobowi                                       | tz   |   |  |
|              |  | Na   | me of Person  |  |
| Jole         | b Contrac                                      | cting, Inc.                                    |   |  |
|              |  | Firr   | n/Company   | <u> </u>   |
| P.O          | . Box 115                                      | 9  |   |  |
|              |  |  | Address   |  |
| Mon          | sey, NY 1                                      | 0952   |   |  |
|              |  | City/S   | State and Zip code  |  |
| jjacol       | oowitz@jol                                     | ebcontracting.com                              |   |  |
|              |  | E-mail address: (to be                         | used for future annual report n   | otification)   |
| For fur      | ther information                               | on concerning this matter, pl                  | lease call:   |  |
| Joel         | Jacobowit                                      | z at (84                                       | 45 , 406-9669   |  |
|              | Name of Per                                    |  | Area Code & Daytime Telepho   | one Number   |
|              |  |  |   |  |
|              | New Filing S<br>Division of C<br>Clifton Build | Corporations<br>ing<br>ve Center Circle        | MAILING AI<br>New Filing Sec<br>Division of Co<br>P.O. Box 6327<br>Tallahassee, FI        | ction<br>rporations  |
| Enclose      | ed is a check for                              | or the following amount:                       |   |  |
| <b>√</b> \$7 | 70.00 Filing Fe                                | See \$78.75 Filing Fee & Certificate of Status |   | \$87.50 Filing Fee, Certificate of Status & Certified Copy |

## APPLIÇATION 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.

| "Inc.," "Co.," "C      | orp," "lnc," "Co," or "Corp.")                |       |   |           |                 |
|------------------------|---|-------|---|-----------|-----------------|
| N/A                    |   |       |   |           |                 |
| (If name unavail       | able in Florida, enter alternate corporate n  | ame   | adopted for the purpose of transacting business in Flor | da)       |                 |
| <sub>2.</sub> New York |   | 3.    | 46-0528710  |           |                 |
| (State or country      | under the law of which it is incorporated)    | _     | (FEI number, if applicable)                             |           |                 |
| 1. 07/06/2012          |   | 5.    | perpetual   |           |                 |
| (Date                  | of incorporation)                             |       | (Duration: Year corp. will cease to exist or "perpetua  | l")       |                 |
| Business will          | commence upon issuance of FL 0                | Cert  | ified Contractor License (01/01/2014 project            | ed)       |                 |
| · <u></u>              | (Date first transacted busine                 | ess i | n Florida, if prior to registration)                    |           |                 |
|                        | (SEE SECTIONS 607.1501 & 60                   | 7.15  | 502, F.S., to determine penalty liability)              |           |                 |
| <u>, 5 Olympia </u>    | Lane Monsey, NY 10952                         |       |   |           |                 |
|                        | (Principal office                             | add   | ress)   |           |                 |
| P.O. Box 1             | 159 Monsey, NY 10952                          |       |   |           |                 |
|                        | (Current mailing                              | add   | ress)   |           | _               |
|                        |   |       |   | 7         | NS S            |
| '·                     | ontracting and environment                    |       | construction  | 노         | SES             |
| (Purpose(s             | s) of corporation authorized in home state of | or co | ountry to be carried out in state of Florida)           | 14 JAN -9 | 유물              |
| . Name and stree       | et address of Florida registered agent:       | (P.C  | D. Box NOT acceptable)                                  | 9         | CG <sup>2</sup> |
| N                      | Pogistored Agents Inc                         |       |   | PH 2: 16  | 45 E            |
| Name:                  | Registered Agents Inc.                        |       | <del></del>   | ?         | Ã.              |
| Office Address:        | 3030 N. Rocky Point Dr. Suite                 | e 1   | 50A_  | 9         | CORPORATIONS    |
|                        | Tampa   |       | , Florida 33607   |           |                 |
|                        | (City)  |       | (Zip code)  |           |                 |
|                        | gent's acceptance:                            |       | • •   |           |                 |

Dan Keen, President
(Registered agent's signature)

Registered Agents, Inc.

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: N/A   |              |  |
| Address: N/A  |              |  |
| Vice Chairman: N/A  |              |  |
| Address: N/A  |              |  |
| Director: N/A   |              |  |
| Address: N/A  |              |  |
| Director: N/A   |              |  |
| Address: N/A  |              |  |
| B. OFFICERS   | <u>ه</u>     |  |
| President: Joel Jacobowitz  | <u></u>      | SEGR<br>VISIO  |
| Address: 5 Olympia Lane   | - 1<br>- 4   | 26<br>25<br>25<br>25<br>25<br>25<br>25<br>25<br>25<br>25<br>25<br>25<br>25<br>25 |
| Monsey, NY 10952  | <del>P</del> | 2007<br>7,4<br>1,4   |
| Vice President: N/A   | <u>.;</u>    | ORA<br>ORA   |
| Address: N/A  | 15           | 1015   |
| Secretary: N/A  |              |  |
| Address: N/A  |              |  |
| Treasurer: N/A  |              |  |
| Address: N/A  |              |  |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or d  | irectors.    |  |
| Signature of Director or Officer  The officer or director signing this document (and who is listed in number 12 above) affirms that the fac are true and that he or she is aware that false information submitted in a document to the Department of third degree felony as provided for in s.817.155, F.S. |              |  |
| 14. Joel Jacobowitz, President with 100% ownership  |              |  |

(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 JOLEB CONTRACTING INC. was filed on 07/06/2012, 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.

I further certify that no other documents have been filed by such corporation.

\*\*\*



Witness my hand and the official seal of the Department of State at the City of Albany, this 31st day of December two thousand and thirteen.

Anthony Giardina

Executive Deputy Secretary of State

Autiny Sicidina

201401020398 \* HD