Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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| | Doing so will generate another cover sheet. | |
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| To: | 1 | :5:11 ⊆ |
| | Division of Corporations | |
| | Fax Number : (850)617-6381 | |
| From: | | # 50 F |
| 110 | Account Name : BUSINESS FILINGS | |
| | Account Number : 105256001620 | ₩. |
| | Phone : (608) 827-5300 | 1 |
| | Fax Number : (608)827-5501 | |

annual report mailings. Enter only one email address please.**

FOREIGN PROFIT/NONPROFIT CORPORATION
InSource East Properties, Inc.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$70.00 |

Electronic Filing Menu

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Corporate Filing Menu

Help

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| | | ION FOR AUTHORIZATION TO TR IN FLORIDA | | 7 |
|------------------------|---|--|------------------------|------------------|
| | | TATUTES, THE FOLLOTTING IS SUBMITE BUSINESS IN THE STATE OF FLORIDA. | ED TO | JAN 3 |
| InSource East P | | JOSINESS IN THE STATE OF FEORIDA. | <u> </u> | 0 |
| l | | COMMANDA A CORPORA A TORRA A CORPORA A TORRA A CORPORA A | | - <u>F</u> |
| | ornoration: must include "INCORPORATED." orp." "Inc." "Co." or "Corp.") | "COMPANY," "CORPORATION," | /'v: | <i>\dolday</i> ? |
| | | | | <u></u> |
| | | | }a+ 131+ 111: € | 40 |
| (If name unavail | able in Florida, enter alternate corporate name | adopted for the purpose of transacting business in | a Florida i | - |
| New York | | | | |
| 2. (State or country) | 3. under the law of which it is incorporated) | (FEI number, if applicable) | | - |
| 1/6/2014 | • , | Demonstral | | |
| 4. | 5. | | | |
| | of incorporation) | (Duration: Year corp. will cease to exist or "pe | rpettial"i | |
| 6. Upon Qualifica | | | | |
| | (Date first transacted business in | | | - |
| | | 602. F.S., to determine penalty liability) | | |
| 7. 360 Motor Park | way Suite 200B, Hauppauge, New York 11788 | | | |
| | (Principal office add | ress) | | _ |
| 360 Motor Parkw | ay Suite 200B, Hauppauge, New York 11788 | | | • |
| | (Curen mailing add | ress) | - | - |
| | | • | | |
| S. All lawful busin | ess | | | |
| (Purpose(s |) of corporation authorized in Irome state or co | untry to be carried out in state of Florida; | | - |
| 9 Name and street | et address of Florida registered agent: (P.C | Nov NOT accentable | | |
| Ittimic into site | | . Box <u>(NOT</u> acceptance) | | |
| Name: | Business Filings Incorporated | | | |
| Office Address: | 515 E. Park Avenue | | | |
| | Tallahassee | Florida 32301 | | |
| | (City) | (Zip code) | | |
| 10 D duku 1 | | - | | |
| IU. Kegistereti aş | geut's acceptance: ad as registered agent and to accept soud | ce of process for the above stated corporati | ture at the | |
| designated in this | application. I hereby accept the appoints | ce of process for the above sitted corporati vent as registered agent and agree to act in | vii as inv Tids enn | piace acito T |
| further agree to co | omply with the provisions of all statutes r | elative to the proper and complete perform | ance of n | #(11) - # |
| duties, and I am f | amiliar with and accept the obligations of | my position as registered agent. | | • |
| | 1111 | | | |
| | Warle Mark Williams, AVP. Bo | prince Filings Incompeted | | |

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.

(Registered agent's signature)

7ax audit # H14000242913

| AN-30-2014 15:30 608 827 5501 608 827 5501 12. Names and business addresses of officers and/or directors: | P.0 | 04 | |
|--|----------------|---------------|----------------|
| A. DIRECTORS | | | |
| Chairman: | | | |
| Address: | April 4 see | | |
| | 2-13 | E | |
| Vice Chairman: | 33 | 30 | , <u></u> |
| Address: | (Lan.) | PM | 1 3 |
| | 20 20 20 | <i>\infty</i> | i |
| Director: Joseph Massaro | | 69 | |
| Address: 360 Motor Parkway Suite 200B, Hauppauge, New York 11788 | | | _ |
| Director: Matthew Mattera | | | _ - |
| Address: 360 Motor Parkway Suite 200B, Hauppauge, New York 11788 | | | . |
| B. OFFICERS President: Joesph Massaro Address: 360 Motor Parkway Suite 200B, Hauppauge, New York 11788 | | | — |
| Vice President: | | | <u> </u> |
| Address: | | | |
| Secretary: Matthew Mattera | | | |
| Address: 360 Motor Parkway Suite 200B, Hauppauge, New York 11788 | | | |
| Treasurer: | | · · · · · | _ |
| Address: | | | |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or 13. | directors. | | |
| Signature of Director or Officer | | | _ |
| The officer or director signing this document (and who is listed in number 12 above) affirms that the fare true and that he or she is aware that false information submitted in a document to the Department of a third degree felony as provided for in s.817.155. F.S. | | | |
| Joesph Massaro, President | | | |

Jax awart # 140000 242913

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

State of New York Department of State | Stat

I hereby certify, that the Certificate of Incorporation of INSOURCE EAST PROPERTIES, INC. was filed on 01/06/2014, 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 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.



Witness my hand and the official seal of the Department of State at the City of Albany, this 29th day of January two thousand and fourteen.

Anthony Giardina Executive Deputy Secretary of State

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