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(((H140000303313)))



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Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : SPIEGEL & UTRERA, P.A.

Account Number : FCA000000001
Phone : (305)854-6000
Fax Number : (305)860-2076

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# FOREIGN PROFIT/NONPROFIT CORPORATION TECHNOLOGY CAREER SERVICES, INC.

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2 02/07/14

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### H14000030331.3

## 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.

I LOLING	DLOGY CAREER SE	MANCES, MAC.			
	rporation: must include "INCORPORATED rp," "Inc." "Co." or "Corp.")	D." "COMPANY." "CORPORATION."		***	
me., co., co	ip, mo, co, or cop, j				
	·	e adopted for the purpose of transacting busines	s in Florida	)	
2. NEW YO	DRK	04-3598732		_	
(State or country u	nder the law of which it is incorporated)	(FEI number, if applicable)		•••	
4. 02/04/20		PERPETUAL			
•	of incorporation)	(Duration: Year corp. will cease to exist or	"perpetual"	)	
6. UPON F					
	(Date first transacted business (SEE SECTIONS 607.1501 & 607.	in Florida, if prior to registration) .1502, F.S., to determine penalty liability)			
7 1309 SE	21st Lane, Cape Cor				
**	(Principal office as	المسورة والمناف			
1309 SE	21st Lane, Cape Cora	al, Florida 33990			
	(Current mailing ac	idress)			
•					
. To engage in a	ny activity or business permitted under	r the laws of the State of Florida and the Ur	nited State	5.	
ο		r the laws of the State of Florida and the Uncountry to be carried out in state of Florida)	nited State	5.	
(Purpose(s)	of corporation authorized in home state or	country to be carried out in state of Florida)	nited State	s. 14 FE	\$1°*
(Purpose(s)	of corporation authorized in home state or address of Florida registered agent: (I	enuntry to be carried out in state of Florida)  P.O. Box <u>NOT</u> acceptable)	nited State	s. 14 FE3 -	50°- 141700 1 ° 41
(Purpose(s)	of corporation authorized in home state or address of Florida registered agent: (I SPIEGEL & UTRERA,	enumry to be carried out in state of Florida)  P.O. Box NOT acceptable)  P.A.	nited State	s. 14 FEB -6	2000 2000 2000 2000 2000 2000 2000 200
(Purpose(s)  9. Name and stree	of corporation authorized in home state or address of Florida registered agent: (I	enumry to be carried out in state of Florida)  P.O. Box NOT acceptable)  P.A.	ALLAHASSE F	6 PH 9-6341	500
9. Name and stree  Name:	of corporation authorized in home state or address of Florida registered agent: (I SPIEGEL & UTRERA,	ecuming to be carried out in state of Florida)  P.O. Box NOT acceptable)  P.A.  Floor	RECOLUMN SER	14 FEB -6 PH 1:	500 - 1
9. Name and stree  Name:	of corporation authorized in home state or address of Florida registered agent: (I SPIEGEL & UTRERA, 1840 SW 22nd Street, 4th	enumry to be carried out in state of Florida)  P.O. Box NOT acceptable)  P.A.	NEWSCIP ONDA	6 PH 1:22	Section of the sectio
9. Name and stree Name: Office Address:	of corporation authorized in home state or raddress of Florida registered agent: (I SPIEGEL & UTRERA, 1840 SW 22nd Street, 4th Mami (City)	ecuming to be carried out in state of Florida)  P.O. Box NOT acceptable)  P.A.  Floor	AULAHASSEE FERRIDA	14 FEB -6 PH 1:	50%
(Purpose(s)  9. Name and stree Name: Office Address:  10. Registered as Having been name	of corporation authorized in home state or  taddress of Florida registered agent: (I  SPIEGEL & UTRERA,  1840 SW 22nd Street, 4th  Mami  (City)  tent's acceptance:  ed as registered agent and to accept se	P.O. Box NOT acceptable)  P.A.  Floor  Florida 33145  (Zip code)	ALLAHASSEE, F. GRIDA	14 FE3 -6 PH 1: 22 he pla	suce gran
(Purpose(s)  9. Name and stree Name: Office Address:  10. Registered as Having been name designated in this	of corporation authorized in home state or  t address of Florida registered agent: (I  SPIEGEL & UTRERA,  1840 SW 22nd Street, 4th  Mami  (City)  tent's acceptance:  ed as registered agent and to accept se application, I hereby accept the appair	P.O. Box NOT acceptable)  P.A.  Floor  Florida 33145  (Zip code)  Truice of process for the above stated corporations as registered agent and agree to accept the above to accept the ac	ALLANASSE FOR SALE PROPERTY OF ALLANASSE STATE OF A	14 FEB -6 PH 1:22 he plant	in the state of th
(Purpose(s)  9. Name and stree Name: Office Address:  10. Registered as Having been namedesignated in this further agree to coductes, and I am fe	of corporation authorized in home state or  saddress of Florida registered agent: (I  SPIEGEL & UTRERA,  1840 SW 22nd Street, 4th  Mami  (City)  tent's acceptance:  sed as registered agent and to accept se application, I hereby accept the appointment of all statutes and liar with and accept the obligation.	P.O. Box NOT acceptable)  P.A.  Floor  Florida 33145  (Zip code)  Trice of process for the above stated corporations as registered agent and agree to acceptable to the proper and complete perfections.	ALLANASSE FOR SALE PROPERTY OF ALLANASSE STATE OF A	14 FEB -6 PH 1:22 he plant	in the second se
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(Registered agent's signature)

1). 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.

### H14000030331-3

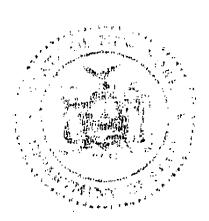
12. Names and business addresses of officers and/or directors:

A. DIRECTORS			
Cheirman: Reginald Menos			
Address: 1309 SE 21st Lane			
Cape Coral, Florida 33990			
Vice Chaliman:			
Address:			<b></b>
		<del></del>	
Director:		<del></del>	<del></del>
Address:			·
Director:	34 (45 	<u>.</u>	<u> </u>
Address:	The second second	<del>(23</del>	books 7 -
	1	92	Sa Cind C
B. OFFICERS		70	
President: Reginald Menos	<u> </u>	<u></u>	
Address: 1309 SE 21st Lane	>	<i></i>	
Cape Coral, FL 33990			
Vice President:	······································		
Address:			<del>-</del>
Secretary: Reginald Menos			
Address: 1309 SE 21st Lane, Cape Coral, Florida 33990			·····
Troosurer. Reginald Menos	<del></del>		
Address: 1309 SE 21st Lane, Cape Coral, Florida 33990			
NOTE: If necessary, you may attach an addendum to the application listing additional officer	s and/or direct	פיוט.	
13. They The house	, <del></del>		
Signature of Director or Officer  The officer or director signing this document (and who is listed in number 12 above) affirms the are true and that he or she is aware that false information submitted in a document to the Depa a third degree felony as provided for in s.817.155, F.S.			
Reginald Menos, President  (Typed as assisted search and condition of page as significant and condition)		- <del></del>	<u></u>

# State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of TECHNOLOGY CAREER SERVICES, INC. was filed on 02/04/2002, 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.

The Biennial Statement is past due.



74 FEB -6 PM 1: 22

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 31st day of January two thousand and fourteen.

Executive Deputy Secretary of State