

F14 0000001674

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

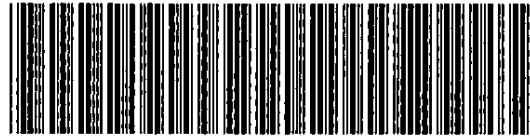
(Document Number)

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DIVISION OF CORPORATIONS  
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## COVER LETTER

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

**SUBJECT:** Financial Connection, 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:

Michael Ross

Name of Person

Financial Connection, Inc.

Firm/Company

3200 N. Federal Hwy., Ste. 108

Address

Boca Raton, FL 33431

City/State and Zip code

mross@financialconnectioninc.com

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

For further information concerning this matter, please call:

Michael Ross

Name of Person

at ( 516 ) 870-0600

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 type="checkbox"/> \$78.75 Filing Fee &<br>Certified Copy | <input checked="" 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. **Financial Connection, 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 York**

(State or country under the law of which it is incorporated)

3. **11-3078012**

(FEI number, if applicable)

4. **9/23/1991**

(Date of incorporation)

5. **Perpetual**

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

6. **Upon Qualification**

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **3200 N. Federal Hwy, Ste. 108 Boca Raton, FL 33431**

(Principal office address)

(Current mailing address)

8. **Any lawful act or activity**

(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:

**Michael Ross**

Office Address:

**3200 N. Federal Hwy, Ste. 108**

**Boca Raton, FL**

(City)

, Florida **33431**

(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: Michael Ross

Address: 3200 N. Federal Hwy, Ste. 108  
Boca Raton, FL 33431

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

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

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

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

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

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

**B. OFFICERS**

President: Michael Ross

Address: 3200 N. Federal Hwy, Ste. 108  
Boca Raton, FL 33431

Vice President: \_\_\_\_\_

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

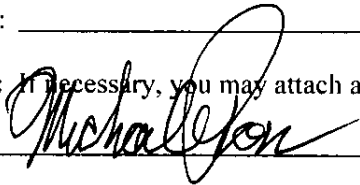
Secretary: \_\_\_\_\_

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. Michael Ross

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

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DIVISION OF CORRELATIONS  
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**State of New York**  
**Department of State** } ss:

I hereby certify, that the Certificate of Incorporation of FINANCIAL CONNECTION, INC. was filed on 09/23/1991, 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.



\*\*\*

*WITNESS my hand and the official seal  
of the Department of State at the City of  
Albany, this 27th day of March two  
thousand and fourteen.*

*Anthony Giardina*

Executive Deputy Secretary of State

**Scott, Tyrone K.**

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**From:** Michael Ross <mross@financialconnectioninc.com>  
**Sent:** Wednesday, April 16, 2014 4:02 PM  
**To:** Scott, Tyrone K.  
**Subject:** FW: Similar Name



**Michael Ross, CFP®**  
President  
**FINANCIAL CONNECTION, INC.**  
TEL – 516-870-0600  
FAX – 516-870-0911  
[mross@financialconnectioninc.com](mailto:mross@financialconnectioninc.com)

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**From:** Michael Ross [<mailto:mross@financialconnectioninc.com>]  
**Sent:** Wednesday, April 16, 2014 4:01 PM  
**To:** 'tyrone.scott@dos.state.fl.us'  
**Subject:** Similar Name

Tyrone

We are aware that there is an existing entity in the state of Florida by the name of Financial Connections, LLC. Notwithstanding, we wish to register our corporation as a foreign corporation in Florida using our legal name, Financial Connection, Inc.



**Michael Ross, CFP®**  
President  
**FINANCIAL CONNECTION, INC.**  
TEL – 516-870-0600  
FAX – 516-870-0911  
[mross@financialconnectioninc.com](mailto:mross@financialconnectioninc.com)