

FL4000002550

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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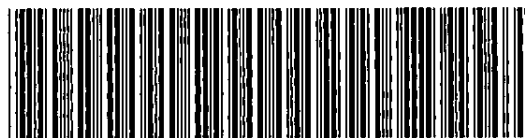
(Business Entity Name)

(Document Number)

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

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RECEIVED  
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2014 JUN 13 PM 4:28  
TO: MR. ALBRIGHT  
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FILED  
14 JUN 13 AM 8:47  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 176879 4301771

AUTHORIZATION

COST LIMIT : \$ 70.00

ORDER DATE : June 13, 2014

ORDER TIME : 3:39 PM

ORDER NO. : 176879-010

CUSTOMER NO: 4301771

FOREIGN FILINGS

NAME: JMD DELAWARE, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes -- EXT# 62920

EXAMINER: \_\_\_\_\_

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TALLAHASSEE FLORIDA

**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. JMD Delaware, 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. Delaware

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

3. N/A

(FEI number, if applicable)

4. 9/16/94

(Date of incorporation)

5. perpetual

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

6. upon filing

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

7. 1201 North Market Street, 16th Floor, Wilmington, DE 19801

(Principal office address)

(Current mailing address)

8. Manage Florida company

(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: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301

(City)

(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.*

Corporation Service Company

By: Stephanie Miller, Asst. V.P.

(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: James M. Dubin

Address: One Madison Place, Harrison, NY 10528

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

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

Director: Thomas R. Pulsifer

Address: 1201 North Market Street, 16th Floor, Wilmington, DE 19801

Director: Tarik J. Haskins

Address: 1201 North Market Street, 16th Floor, Wilmington, DE 19801

**B. OFFICERS**

President: James M. Dubin

Address: One Madison Place, Harrison, NY 10528

Vice President: Eric Goodison

Address: c/o Paul Weiss LLP, 1285 Avenue of the Americas, New York, NY 10019-6064

Secretary: & Vice President - John J. O'Neil

Address: c/o Paul Weiss LLP, 1285 Avenue of the Americas, New York, NY 10019-6064

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. John J. O'Neil

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

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TALLAHASSEE FLORIDA

# Delaware

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## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "JMD DELAWARE, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF JUNE, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JMD DELAWARE, INC." WAS INCORPORATED ON THE SIXTEENTH DAY OF SEPTEMBER, A.D. 1994.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

FILED  
14 JUN 13 AM 8:47  
SECRETARY OF STATE  
DELAWARE

2435858 8300

140836355



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 1451682

DATE: 06-13-14