

7/31/2014 14:51:01 From: 8506 2238

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION

The Transition Network, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$70.00

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Corporate Filing Menu

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14 JUL 31 PM 12:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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14 JUL 31 PM 3:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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1/4

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: THE TRANSITION NETWORK, 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:

Name of Person

C T Corporation System

Firm/Company

1200 South Pine Island Road

Address

Plantation

FL 33324

City/State and Zip code

CT-Statecommunications@wolterskluwer.com

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

For further information concerning this matter, please call:

Angela Lamaruggine

at 855

316-8944

Name of Person

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:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

SECRETARY OF STATE
TALLAHASSEE, 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. THE TRANSITION NETWORK, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New York 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. MARCH 02, 2000 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 140 Broadway 8th Floor
(Principal office address)
- New York, NY 10005
(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (Zip code)

9. 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.

C T Corporation System
By: Jenifer Vincent Jenifer Vincent
(Registered agent's signature) Vice President & Assistant Secretary

10. 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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11. Names and business addresses of officers and/or directors:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. DIRECTORS

Chairman: Barbara Beizer

Address: P.O. Box 2023, Church Street Station, New York, NY 10008-2023

Vice Chairman: _____

Address: _____

Director: See Addendum for Additional Directors and Officers

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Barbara Beizer

Address: P.O. Box 2023, Church Street Station, New York, NY 10008-2023

Vice President: JoAnne D'Alco

Address: P.O. Box 2023, Church Street Station, New York, NY 10008-2023

Secretary: Linda Paige Levine

Address: P.O. Box 2023, Church Street Station, New York, NY 10008-2023

Treasurer: Marlene Gerber

Address: P.O. Box 2023, Church Street Station, New York, NY 10008-2023

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. _____

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.

13. Barbara Beizer

President

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Transition Network, Inc.
July 2014

Directors

Ellen Bartoldus

P.O. Box 2023, Church Street Station, New York, NY 10008-2023

Dale Davis

P.O. Box 2023, Church Street Station, New York, NY 10008-2023

Barbara Hoenig

P.O. Box 2023, Church Street Station, New York, NY 10008-2023

Mary Klein

P.O. Box 2023, Church Street Station, New York, NY 10008-2023

Diane Levine

P.O. Box 2023, Church Street Station, New York, NY 10008-2023

Chrissa Merron

P.O. Box 2023, Church Street Station, New York, NY 10008-2023

Carol Oswald

P.O. Box 2023, Church Street Station, New York, NY 10008-2023

Jean Palmer

P.O. Box 2023, Church Street Station, New York, NY 10008-2023

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(6/6)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**State of New York
Department of State } ss:**

I hereby certify, that the Certificate of Incorporation of THE TRANSITION NETWORK, INC. was filed on 03/02/2000, under the name of FRANK MILLEN ENTERPRISES, INC., as a Not-for-Profit Corporation 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.

A Certificate of Amendment FRANK MILLEN ENTERPRISES, INC., changing its name to THE TRANSITION NETWORK, INC., was filed 02/12/2004.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 30th day of July
two thousand and fourteen.*

Anthony Giardina

Anthony Giardina
Executive Deputy Secretary of State