

F14000003789

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

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1/4

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Response 4 HELD DIV. Self-DIRECT 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:

PATRICIA Palumbo

Name of Person

Response 4 HELD DIV. Self DIRECT INC.

Firm/Company

12 Oswego ST

Address

Baldwinsville NY 13027

City/State and Zip code

ppalumbo @ selfdirectinc.com

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

For further information concerning this matter, please call:

PAT Palumbo

Name of Person

at (315) 635-5374 X305

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 14, 2014

PATRICIA PALUMBO
12 OSWEGO ST
BALDWINVILLE, NY 13027

SUBJECT: RESPONSE 4 HELP DIV. SELF DIRECT INC.
Ref. Number: W14000049870

We have received your document for RESPONSE 4 HELP DIV. SELF DIRECT INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 114A00017510

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. Self-Direct 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. 43-1988486

(FEI number, if applicable)

4. 2/7/2003

(Date of incorporation)

5. Perpetual

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

6. anticipated 10/2014

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

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

7. 12 Oswego Street, Baldwinsville, NY 13027

(Principal office address)

12 Oswego Street, Baldwinsville, NY 13027

(Current mailing address)

8. Personal Emergency Response Systems

(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: Deborah Fava

Office Address: 15043 Lure Trail

Bonita Springs


(City)

, Florida 34135

(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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TALLAHASSEE, FLORIDA

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FILED

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

A. DIRECTORS

Chairman: Patricia Palumbo

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Address: 104 Coachmans Whip
Baldwinsville, NY 13027

SECRETARY OF STATE
TALLMAN'S OFFICE

Vice Chairman: _____

Address: _____

Director: Patricia Palumbo

Address: 104 Coachmans Whip
Baldwinsville, NY 13027

Director: _____

Address: _____

B. OFFICERS

President: Patricia Palumbo

Address: 104 Coachmans Whip
Baldwinsville, NY 13027

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. Patricia Palumbo

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. Patricia Palumbo, Director

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

State of New York
Department of State } ss:

APPROVED
AND
FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I hereby certify, that the Certificate of Incorporation of SELF-DIRECT INC. was filed on 02/07/2003, 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 30th day of July two
thousand and fourteen.

Anthony Giardina

Executive Deputy Secretary of State