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(Requestor's Name)			
(Address)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
, ,			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

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14 OCT -2 AN 8: 21 SECREIAN OF STATE







ACCOUNT NO. : I2000000195 REFERENCE : 322972 7183396 AUTHORIZATION : COST LIMIT : ORDER DATE: October 2, 2014 ORDER TIME : 3:05 PM ORDER NO. : 322972-005 CUSTOMER NO: 7183396 FOREIGN FILINGS NAME: EXTENSIS IV, INC. XXXX QUALIFICATION (TYPE: CO) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY
XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

#### **COVER LETTER**

TO: New Filing Section Division of Corporations	·			
SUBJECT: Extensis IV, Inc.				
Name of corporation - must include suffix				
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Sta above referenced foreign corporation to transact busing	nding" and check are submitted to register the			
Please return all correspondence concerning this matter	er to the following:			
William Canning				
Name of	Person			
Extensis IV, Inc.				
Firm/Company				
900 Route 9 North Suite 203				
Addr	ress			
Woodbridge, New Jersey 07095				
•	and Zip code			
bcanning@extensisgroup.com	for future annual report notification)			
E-man address, (to be used	for rutare annual report notification;			
For further information concerning this matter, please call:				
Bill Canning at (	634-1910 x 760			
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	3 \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certified Copy ☐ Certificate of Status & Certified Copy			



### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA 14 OCT -2 AM 8: 21

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDAL [AND CONTROL OF THE STATE OF FLORIDAL [AND CONTROL OF THE STATE OF THE Extensis IV, Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "lnc.," "Co.," "Corp," "lnc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 01-0584674 New Jersey (State or country under the law of which it is incorporated) (FEI number, if applicable) (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 900 Route 9 North, Suite 203 Woodbridge New Jersey 07095 (Principal office address) 900 Route 9 North, Suite 203 Woodbridge New Jersey 07095 (Current mailing address) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee . Florida (City) 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. Courtney Williams Corporation Service Company Asst. Vice President

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.

(Registered agent's signature)



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

A. DIRE	ECTORS	14 OCT -2 AM 8: 21
Chairman:	Richard Augustyn	SECRETA DI GEL STATE
	900 Route 9 North Suite 203	SECRETA D. OF STATE
	Woodbridge, NJ 07095	
/ice Chair	rman:	
Director:		
Director:		
3. OFFI	ICERS	
resident:	Dan Sheridan	
Address:	900 Route 9 North Suite 203	
	Woodbridge, NJ 07095	
√ice Presi	dent:	
		777 778 777 778 777 777 777 777 777 777
Secretary:	Greg Tupe	
Address:	900 Route 9 North ,Suite 203, Woodbridge, NJ 07095	
	Don Abernathy	
	900 Route 9 North ,Suite 203, Woodbridge, NJ 07095	
	If necessary, you may attach an addendum to the application listing additi	onal officers and/or directors.
	Xa alett	
re true ai	Signature of Director or Officer er or director signing this document (and who is listed in number 12 above and that he or she is aware that false information submitted in a document gree felony as provided for in s.817.155, F.S.	e) affirms that the facts stated herein to the Department of State constitutes
	Abernathy	
	(Typed or printed name and capacity of person signing app	olication)

## STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING



14 OCT -2 AM 8:21

SECRETATE OF STATE

#### EXTENSIS IV, INC.

0100870104

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on January 28, 2002.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Richard J Augustyn 900 Route 9 N Ste 503 Woodbridge, NJ 07095



Certification# 133731383

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 2nd day of October, 2014

Andrew P Sidamon-Eristoff
State Treasurer

Verify this certificate at https://www1.state.nj.us/TYTR\_StandingCert/JSP/Verify\_Cert.jsp