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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: Student Summers In	IC.			
Name of corporation - must include suffix				
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Stan above referenced foreign corporation to transact businesses."	ding" and check are submitted to register the			
Please return all correspondence concerning this matter	to the following:			
Patti Roberts				
Name of I	Person			
Student Summers Inc.				
Firm/Com	pany			
19641 Island Court Drive				
Boca Raton, FL 33434	iss			
City/State and Zip code				
PATTI@STUDENTSUMMERS				
E-mail address: (to be used f	or future annual report notification)			
For further information concerning this matter, please c	all:			
Patti Roberts561	992-0442			
· · · · · · · · · · · · · · · · · · ·	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: \$\Boxed{1}\$ \$70.00 Filing Fee \$\Boxed{1}\$ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Service Status & Certified Copy \$87.50 Filing Fee, Certificate of Status & 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.

	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"	
		adopted for the purpose of transacting business in Florida)	-
New Jei		22-3458251	_
•	y under the law of which it is incorporated)	(FEI number, if applicable)	
July 8, 1	996	Perpetual	
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	_
		n Florida, if prior to registration) 502. F.S., to determine penalty liability)	_
	(SEE SECTIONS 607.1501 & 607.15 land Court Drive, Boca (Principal office add	Raton, FL 33434	_
19641 ls Same as	(SEE SECTIONS 607.1501 & 607.15 land Court Drive, Boca (Principal office add	Raton, FL 33434	- -
Same as	(SEE SECTIONS 607.1501 & 607.15 land Court Drive, Boca (Principal office add	Raton, FL 33434 ress)	15 JAN - 9
Same as Name and stree Name:	(SEE SECTIONS 607.1501 & 607.15 land Court Drive, Boca (Principal office add above (Current mailing add et address of Florida registered agent: (P.C	Raton, FL 33434 ress) D. Box NOT acceptable)	5
Same as	(SEE SECTIONS 607.1501 & 607.15 land Court Drive, Boca (Principal office add s above (Current mailing add et address of Florida registered agent: (P.C. Patti Roberts	Raton, FL 33434 ress) D. Box NOT acceptable)	

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)

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.

11. Names and business addresses of officers and/or directors:		
A. DIRECTORS		
Chairman:		
Address:		
Vice Chairman:		_
Address:		
Director:		_
Address:		
D' .		DIV.
Director:	JAN	DIVISION
Address:	三	
	5	
B. OFFICERS	PH 12:	CORPORATIONS
President: Patti Roberts	=	_ <u>A</u>
Address: 19641 Island Court Drive	<u> </u>	
Boca Raton, FL 33434		
Vice President:		
Address:		
Secretary:		
Address:		
Treasurer:		
Address:		
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.		
12. If the cessary, you may attach any attachment to the application insting additional officers and/of directors.		
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 he are true and that he or she is aware that false information submitted in a document to the Department of State cons a third degree felony as provided for in s.817.155, F.S.		
13. Patti Roberts, President		
(Typed or printed name and capacity of person signing application)		

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES LONG FORM STANDING WITH OFFICERS AND DIRECTORS

STUDENT SUMMERS INC.

0100671634

With the Previous or Alternate Name ROBER4 CORP. (Previous Name)

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 July 8, 1996.

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:

Patti Roberts 30 Whitbay Drive West Orange, NJ 07052

I further certify that the incorporator is:

Capitol Information Svc Inc 172 West State St Trenton, NJ 08608

I further certify that as of the date of this certificate, the following were listed as officers/directors of this business on the last Annual Report filed in this office on: July 20, 2014.

Chief Exec. Officer (CEO)

Patti Roberts 30 Whitbay Drive West Orange, NJ 07052 OIVISION OF CORPORATION

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES LONG FORM STANDING WITH OFFICERS AND DIRECTORS

STUDENT SUMMERS INC.

0100671634



Certification# 134668886

Verify this certificate at https://wwwl.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 29th day of December, 2014

10 a.

Andrew P Sidamon-Eristoff
Acting State Treasurer

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