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(((H15000127229 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : BUSINESS FILINGS

Account Number : 105256001620 Phone

: (608)827-5300

Fax Number

: (608)827-5501

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

FOREIGN PROFIT/NONPROFIT CORPORATION HARRY BENSON, LTD.

Certificate of Status Certified Copy 0 Page Count 04 Estimated Charge \$70,00

JUN 1 2015

S. GILBERT

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State of New York Department of State } ss

I hereby certify, that the Certificate of Incorporation of HARRY BENSON, LTD. was filed on 07/07/1976, 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 19th day of May two thousand and fifteen.

Executive Deputy Secretary of State

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. Harry Benson, L	TD. Inc.	•
	orporation; must include "INCORPORATED. orp." "Inc." "Co." or "Corp.")	" "COMPANY," "CORPORATION."
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)
, New York	3	13-2862421
(State or country 7/7/1976	nunder the law of which it is incorporated) 5.	(FEI number, if applicable) Perpetual
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpenial")
		in Florida, if prior to registration) 502, F.S., to determine penalty liability)
12582 Mallet Cir	(Principal office add	hess)
	(Current mailing add	iress)
All lawful busing	ess	E B
	of corporation authorized in home state or cate address of Florida registered agent: (P.	O Por NOT accordable)
Name:	Business Filings Incorporated	O. Box MOTacceptante)
Office Address:	515 E. Park Avenue	
	Tallahassee	. Florida ³²³⁰¹
	(City)	(Zip code)
Having been nam designated in this further agree to c	application, I hereby accept the appoint omply with the provisions of all statutes amiliar with and accept the obligations of the control of	
	Mark Williams, AVP, F	Business Filings Incorporated
	(Registered agent's s	ignature)

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.

Jax audut#H150001272299 3

MAY-28-20	15 16:33 608 827 5501 nes and business addresses of officers and/or directors:	608 827	5501	P.004/004		
	ECTORS					
Chairman	:					
Address:						
Vice Chai	nnan:		- 			
Address:						
Director:	Harry Benson					
Address:	12582 Mallet Circle, Wellington, Florida 33414					
				 		
Director:				_		
Address:			. 			
B. OFFICERS						
	Harry Benson		 .			
Address:	12582 Mallet Circle, Wellington, Florida 33414	·—				
•						
	dent:					
Address:	12582 Mallet Circle, Wellington, Florida 33414		7.0			
-						
Secretary:	Dian Benson					
Address:	12582 Mallet Circle, Wellington, Florida 33414		_ ·			
	Dian Benson					
Address:	12582 Mallet Circle, Wellington, Florida 33414	<u> </u>				
NOTE: 1	If necessary, you may attach an addendum to the application listing additiona	l officers an	id/or direc	tors.		
13. ,——,	Harry Benson Signature of Director or Officer					
are true as	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 to the gree felony as provided for in s.817.155, F.S.					

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