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(Re	equestor's Name)				
(Ac	idress)				
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(Ci	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bı	usiness Entity Nan	ne)			
(Document Number)					
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DEPARTMENT OF DIVISIONS 16 MAY 12 AN IO: 59

MAY 1 3 2016

SHARREN

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 139165 4357736

AUTHORIZATION : Spulle 1

COST LIMIT : \$ 78.75

ORDER DATE: May 11, 2016

ORDER TIME : 9:57 AM

ORDER NO. : 139165-005

CUSTOMER NO: 4357736

FOREIGN FILINGS

NAME: AFP SEVENTY SEVEN CORP.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

COVER LETTER

TO:	Registration Section Division of Corporations						
CHD	AFP SE	VENTY SEVEN CO	RP.				
SOPI	ECT:		of corporat	ion - mı	st include suffix		
Dear S	Sir or Madam:						
"Certi	ficate of Existen		of Good S	Standing	" and check are sub	ct Business in Florida," omitted to register the	
	return all corres EY O'BRIEN	pondence concern	ing this ma	tter to tl	ne following:		
			Name	of Perso	on		
UNIT	ED CAPITAL CO	RP.				•	
			Firm/C	ompany			
9 PAR	K PLACE, 4TH F	LOOR	•				
			Ac	ldress			
GREA	T NECK, NY 110	21					
		· · · · · · · · · · · · · · · · · · ·	City/Stat	e and Z	p code		
sobrie	n@unitedcapitalco	•					
		E-mail address	: (to be us	ed for fu	ture annual report i	notification)	
For fu	rther information	concerning this n	atter, plea	se call:			
STACEY O'BRIEN 51		516	466-6464				
	Name of Perso	on	Area C	Code	Daytime Telep	hone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		S:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				
Enclos	sed is a check for	the following amo	ount:				
.\$7	0.00 Filing Fee	\$78.75 Filin Certificate of	g Fee & of Status		3.75 Filing Fee & rtified Copy	S87.50 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.

l,	Y SEVEN CORP.	,		
	corporation; must include "INCORPORATED," 'Corp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORA"	TION,"	
(If name unavai	lable in Florida, enter alternate corporate name ad	opted for the purpose of trans	acting business in Florida)	
2	ry under the law of which it is incorporated)		if applicable)	
	e of incorporation) 5,	(Date of duration, if other than perpetual)		
9 PARK PLACE	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150 E, 4TH FLOOR, GREAT NECK, NY 11021 (Principal			
	(Current mailing	address, if different)	1527	
3. Name and <u>stre</u> Name:	et address of Florida registered agent: (P.O. CORPORATION SERVICE COMPANY	Box NOT acceptable)		
Office Address:	1201 HAYS STREET			
	TALLAHASSEE	, Florida	1: 05 STATE LORIDI	
	(City)	(Zip code)	A	
Having been nar designated in thi further agree to	ent's acceptance: ned as registered agent and to accept service of sapplication, I hereby accept the appointme comply with the provisions of all statutes re- familiar with and accept the obligations of	ent as registered agent and lative to the proper and co	l agree to act in this capacity. implete performance of my	
	M. Jank	P	Melissa Zender	

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 Address: ____ Vice Chairman: ANTHONY MICELI Director: 9 PARK PLACE, 4TH FLOOR Address: GREAT NECK, NY 11021 **B. OFFICERS ANTHONY MICELL** ~> President: 9 PARK PLACE, 4TH FLOOR Ū Address: **GREAT NECK, NY 11021** MICHAEL LAMORETTI Vice President: 9 PARK PLACE, 4TH FLOOR Address: **GREAT NECK, NY 11021** MICHAEL LAMORETTI Secretary: 9 PARK PLACE, 4TH FLOOR, GREAT NECK, NY 11021 Address: ANTHONY MICELI Treasurer: 9 PARK PLACE, 4TH FLOOR, GREAT NECK, NY 11021 Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer

The officer of director signing this document (and who is listed in number 11 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.

ANTHONY MICELI, PRESIDENT

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "AFF SEVENTY SEVEN CORP." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF MAY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AFP SEVENTY SEVEN CORP." WAS INCORPORATED ON THE FOURTEENTH DAY OF NOVEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

e at corp delaware gov/aut

Authentication: 202302631

Date: 05-11-16