

JUN. 9. 2016 11:33AM
DIVISION OF CORPORATIONS

JONES FOSTER 561 650 0475

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Florida Department of State
Division of Corporations
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Division of Corporations
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From:

Account Name : JONES, FOSTER, JOHNSTON & STUBBS, P.A.
Account Number : 076077003231
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FOREIGN PROFIT/NONPROFIT CORPORATION
F. S. NEILL, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

**M. MILLIGAN
EXAMINER**

JUN 10

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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.

F. S. NEILL, INC.

1. F. S. NEILL, 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 3. 11-1119860
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. January 8, 1924 5. May 16, 2016
(Date of incorporation) (Date of duration, if other than perpetual)
6. (Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 8 Adams Place, Harrison, New York 10528
(Principal office address)
- (Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

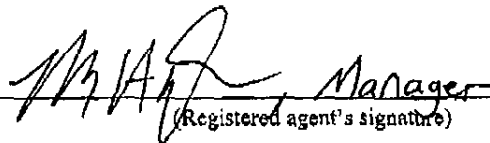
Name: Jones Foster Service, LLC

Office Address: 505 S. Flagler Drive, Suite 1100

West Palm Beach, Florida 33401
(City) (Zip code)

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.

 Manager
(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.

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2016 JUN -9 PM 5:03
SECRETARY OF STATE
TALLAHASSEE FLORIDA

JUN. 9. 2016 11:33AM

JONES FOSTER 561 650 0435

NO. 4356 P. 3

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Robert E. Mensch

Address: 8 Adams Place, Harrison, New York 10528

Director: _____

Address: _____

B. OFFICERS

President: Robert E. Mensch

Address: 8 Adams Place, Harrison, New York 10528

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. _____

Signature of Director or Officer

The officer or 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.

Robert E. Mensch, President

13. _____

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

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State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of F. S. NEILL, INC. was filed on 01/08/1924, fixing the duration as perpetual, 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 07th day of June
two thousand and sixteen.*

Anthony Giardina
Executive Deputy Secretary of State

201606080249 * 45

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TALLAHASSEE FLORIDA