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Certified Copies	_ Certificate:	s of Status
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Office Use Only



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August 12, 2016

CODY FLORINDI 2125 CENTER AVE, STE 507 FT LEE, NJ 07024

SUBJECT: FERRUM INC. Ref. Number: W16000056242

We have received your document for FERRUM INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 216A00017113

Octavia I Simmons Regulatory Specialist II Registration Section

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	COARKTE	TITER:		
TO: Registration Section Division of Corporations				
SUBJECT: FERRUM INC.				• • •
N	ame of corporation -	must include suffix	······································	
Dear Sir or Madam:				
The enclosed "Application by Foreig "Certificate of Existence," or "Certificate of Existence,	ficate of Good Stand	ing" and check are submitte	siness in Florida," d to register the	
Please return all correspondence con CODY FLORINDI	cerning this matter t	to the following:		
	Name of P	erson		<del>_</del>
FERRUM INC.				<u> </u>
2125 CENTER AVENUE, SUITE 507	Firm/Comp	pany.		
FORT LEE, NJ 07024	Addres	38°		<del>-</del>
FLORINDI@NWM-USA.COM	City/State an	d Zip code		
E-mail ac	idress: (to be used fo	or future annual report notifi	cation)	
For further information concerning	this matter, please ca	ill:		
CODY FLÖRINDI	201 at (	720:2850°		
Name of Person	Area Code	Daytime Telephone	Number	,
STREET/COURIER ADD Registration Section Division of Corporations Clifton Building 2661 Executive Center Circ		MAILING ADDR Registration Section Division of Corpor P.O. Box 6327 Tallahassee, FL 32	n ations	
Tallahassee, FL 32301  Enclosed is a check for the following	ig amount:			
■ \$70.00 Filing Fee □ \$78.75	•	\$78.75 Filing Fee &  Certified Copy	\$87.50 Filing Fee, Certificate of State	

#### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Enter name of c	orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION,"	
	n of Florida Inc.		
(If name unavail NEW JERSEY 2.	ble in Florida, enter alternate corporate na	ame adopted for the purpose of transacting busin 52-2198061	ess in Florida)
(State or counti 09/16/1999	yainder the law of which it is incorporated	) (FEI number, if applicabl	e)
(Date 08/08/2016:	of incorporation)	(Date of duration, if other than p	erpetual)
	(Date first transacted busine (SEE SECTIONS 607.150) & 60 VENUE, SUITE 507 FORT LEE, NJ 070	ess in Florida, if prior to registration) 07, 1502; P.S., to determine penalty liability) 24	
	(Pr	incipal office address)	**************************************
, <del></del>	(Current:n	nailing address, if different)	
Name and stree	et address of Florida registered agent: CORPORATION SERVICE COMPAT		16 AUG
Name:	1201 HAYS STREET.	<del></del>	29
	TALLAHASSEE	32301 Florida	F 5 7 2
	(City).	(Zip code)	TATE ORIO
Having been nan lesignated in this further agree to c	application, I hereby accept the application, I hereby accept the applications of all statu	service of process for the above stated corpointment as registered agent and agree to tes relative to the proper and complete per ns of my position as registered agent.	act in this capacity.
luties, and I am j		Emily Croft	•
luties, and I am j		Dainy Civil	

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dress:  5503 SCHAFISHEIM, SWITZERLAND  URS AFFOLTER.  1NDUSTRIESTRASSE II  1dress:  5503 SCHAFISHEIM, SWITZERLAND  MARK NAEGELI  1000  100	umar					
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industriestrasse ii  MARK NAEGELI  Ector:  INDUSTRIESTRASSE II  Gress:  S503 SCHAFISHEIM, SWITZERLAND  OFFICERS: ERNST-WERTMOLLER  ideas:  INDUSTRIESTRASSE II  Gress:  S503 SCHAFISHEIM, SWITZERLAND  URS AFFOLTER  © President: INDUSTRIESTRASSE II  Gress:  S503 SCHAFISHEIM, SWITZERLAND  URS AFFOLTER  © President: INDUSTRIESTRASSE II  S503, SCHAFISHEIM SWITZERLAND  RICHARD DANOFF  Tetaly: 2125 CENTER AVENUE; SUITE 507 FORT LEE, NJ.07024  Gress:  STE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.  Signature of Director or Officer  Forficer or director signing this document (and who is altsed in number 11 above) affirms that the facts stated herein true and that he or she is aware that false information submitted in a document to the Department of State constitute true and that he or she is aware that false information submitted in a document to the Department of State constitute true and that he or she is aware that false information submitted in a document to the Department of State constitute true and that he or she is aware that false information submitted in a document to the Department of State constitute true and that he or she is aware that false information submitted in a document to the Department of State constitute.	. <b>17</b> 15.2			·		•
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## STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

### FERRUM INC. 0100793412

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on September 16, 1999.

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 office are:

NEW WORLD MANAGEMENT, INC. 2125 CENTER AVE. SUITE 507 FORT LEE, NJ 07024



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 11th day of August, 2016

Sold H Dulle

Ford M. Scudder Acting State Treasurer

Certificate Number: 6073526451

Verify this certificate online at

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