

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H170001993093)))



H1700019930934BC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (950) 617-6283

From: Account Name : C T CORPORATION SYSTEM
Account Number : PCA000050023
Phone : (614) 290-3338
Fax Number : (954) 208-0845

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

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION
American Conference Institute, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$2,370.00

FILED
2017 JUL 31 AM 10:13
CLERK OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

2017 JUL 31 AM 9:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY
AUG - 1 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: American Conference Institute, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Name of Person

Firm/Company

Address

City/State and Zip code

CLS-AnnualReportFilingTeam@wolterskluwer.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Person at ()
Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & 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.*

1. American Conference Institute, 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. 93-0116207
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 03/04/1985 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

6. 11/15/2005
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 45 West 25th Street, 11th Floor, NY 10010
(Principal office address)

- same
(Current mailing address, if different)

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

 Name: C T Corporation System
 Office Address: 1200 South Pine Island Road
Plantation , Florida 33324
 (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.

By: C T Corporation System
Ternell Kearney Asst. Secretary
 (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.

2017 JUL 31 AM 10:13
 FILED
 DEPARTMENT OF STATE
 SECRETARY'S OFFICE

FILED
2017 JUL 31 AM 10:13
CLERK OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS SEE ATTACHMENT

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS SEE ATTACHMENT

President: Toby Belman

Address: 45 West 25th Street

11th Floor, NY 10010

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.  CFO David Gray

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.

13. David Gray, CFO

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

FILED
2017 JUL 31 AM 10:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**Attachment to Florida
Officers & Directors**

- | | | |
|---|-------------------|---------------------|
| 1 | Full Name: | David Gray |
| | Officer/Director: | Officer |
| | Officer's Title: | CFO |
| | Director's Title: | |
| | Business Address: | 45 West 25th Street |
| | City: | 11th Floor |
| | State: | NY |
| | ZIP Code: | 10010 |
| 2 | Full Name: | Toby Belman |
| | Officer/Director: | Officer, Director |
| | Officer's Title: | CEO/President |
| | Director's Title: | Director |
| | Business Address: | 45 West 25th Street |
| | City: | 11th Floor |
| | State: | NY |
| | ZIP Code: | 10010 |

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of AMERICAN CONFERENCE INSTITUTE, INC. was filed on 03/04/1988, 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 23rd day of June
two thousand and seventeen.*



Brendan W. Fitzgerald
Executive Deputy Secretary of State

201706200016 * 32

FILED
2017 JUL 31 AM 10:13
CLERK OF STATE
ALBANY, NY 12241