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To:				-
	Division of Co	rporations	,,,,,	- 5
	Fax Number	: (850)617-6383	<i>.</i>	₽¥.
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From:				<b>C</b>
	Account Name	: CONTRACTORS REPORTING SERVICES, INC.		٠,
	Account Number	: I20050000099		-,,
	Phone	: (813)932-5244	ode î	යා
	Fax Number	: (813)932-3782	· }-	
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		s for this business entity to be used for ings. Enter only one email address please		:
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F	il Address: b	ill@activatemylicense.com		

## FOREIGN PROFIT/NONPROFIT CORPORATION ALL-RITE CONSTRUCTION CO., INC

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$87.50

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(((H18000172508 3)))

From: Roman Albano Fax: (813) 932-5244 To. Fax: (850) 817-6383 Page 4 of 7 06/25/2018 4:32 PM

## TRANSMITTAL LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: ALL-RITE CONSTRU			
(?)	lame of corporati	on - must include suffix)	
Dear Sir or Madam:			
The enclosed "Application by Foreig "Certificate of Existence", and check transact business in Florida.			
Please return all correspondence cond	erning this matte	er to the following:	
BILL MOORE			
	(Name o	f Person)	
CONTRACTORS REPORTING 8	ERVICE INC		
	(Firm/Co	ompany)	
13795 N NEBRASKA AVE			
	(Add	lress)	
TAMPA, FL 33613			
	(City/State	and Zip code)	
For further information concerning th	nis matter, please	call:	
BILL MOORE	at (813	932-5244	_
(Name of Person)		Code & Daytime Telepho	one Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING ADDRESS Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	ns
		3 S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy



June 21, 2018

#### FLORIDA DEPARTMENT OF STATE

CONTRACTORS REPORTING SERVICES, INC

SUBJECT: ALL-RITE CONSTRUCTION CO., INC

REF: W18000057803

2016 JUH 25 KH 8: 01

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of the entity listed on the fax cover sheet and the name of the entity listed in the document must be identical. Please amend the document or the fax cover sheet accordingly.

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.

Judy A Leggett Regulatory Specialist II Registration Section FAX Aud. #: H18000172508 Letter Number: 918A00012918

## 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.

(Enter name of "Inc.," "Co.," "	construction co., inc corporation; must include "INCORPORATI Corp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATIO	Ν,"
(If name unava	ilable in Florida, enter alternate corporate na	me	adopted for the purpose of transaction	ng business in Florida)
NEW JERSE	EY	3.	22-2979536	
State or countr	y under the law of which it is incorporated)	-	(FEI number, if app	plicable)
04/28/1989		5.	PERPETUAL	
(I)a	te of incorporation)		(Duration: Year corp. will cease to	o exist or "perpetual")
UPON QUAI				
Date first trans	acted business in Florida. If corporation has (SEE SECTIONS 607.1		transacted business in Florida, inse, 607.1502 and 817.155, F.S.)	rt "upon qualification.")
73 DEWEY	ST GARFIELD, NJ 07026			<u> </u>
	(Principal office	add	ress)	
о вох 209	8 GARFIELD, NJ 07026			
Name and <u>st</u>	<u>reet address</u> of Florida registered agen	ıt:	(P.O. Box or Mail Drop Box <u>NO</u>	<u>)T</u> accoptable)≌
Name:	CONTRACTORS REPORTING SERV	VIC	E,INC.	ا معنی او مور ا معنی او مور
lice Address:	13795 N NEBRASKA AVE			
	TAMPA		, Florida 33613	
	(City)		(Zip code)	e 6
Registered ag	ent's acceptance:			<u> </u>
ving been nu signated in th ther agree to	med as registered agent and to accept so is application, I hereby accept the appo- comply with the provisions of all statute ar with and accept the obligations of my	intr es r	nent as registered agent and agr elative to the proper and comple	ree to act in this capacity.
	William E.	pr	ove	

<sup>10.</sup> 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			
Chairman:			
Address:			
Vice Chairman:			
Address:			
	<del>,</del>	· · ·	
Director:			
Address:			
	· · · · · · · · · · · · · · · · · · ·		
11. Names and business addresses of officers and/or directors:	······································	-	
Director:			
Address:			
President: WARREN ZYSMAN  Address: 73 DEWEY ST  GARFIELD, NJ 07026			
Vice President; GREGG ZYSMAN		··· • • · · · · · · · · · · · · · · · ·	
Address: 73 DEWEY ST	1.9		
GARFIELD, NJ 07026		20 0	
Vice President: JEFFREY ZYSMAN	р <u>. (</u> .) Селения	<u>تتم</u> 135	ا المتعادية . ا
Address: 73 DEWEY ST GARFTELD, NJ 07026	,, <del>-</del>	13	trus.
Treasurer:	,	<u> </u>	2777.5 pc
Address:	tyn	<del>&amp;</del>	
NOTE: If necessary, you may attach an addendum to the application listing additional of	्युः Ticers and/or direc	tors.	
	<del>-</del> <del>-</del> -		
(Signature of Director of Officer listed in number 12 of the application)	<del></del>	·	
JEFFREY ZYSMAN - VP			
(Typed or printed name and capacity of person signing applicatio	n)		

# STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

Τo.

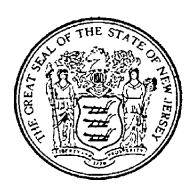
### ALL-RITE CONSTRUCTION CO., INC. 0100414969

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 April 28, 1989.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey. Annual Reports are outstanding for the following year(s): 2018

I further certify that the registered agent and office are:

WARREN ZYSMAN 73 DEWEY STREET GARFIELD, NJ 07026



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 7th day of June, 2018

Elizabeth Maher Muoio State Treasurer

Certificate Number: 6088861317

Verify this certificate online at

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