

FA9000002750

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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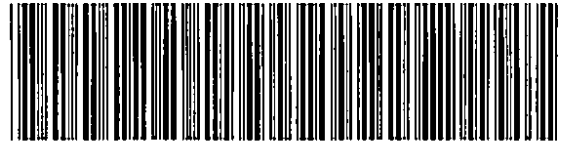
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
2019 JUN 13 PM 4:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
19 JUN 13 AM 11:08  
TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATIONS

Y SCOTT

JUN 14 2019

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 783288 7842417

AUTHORIZATION

COST LIMIT \$ 70.00

ORDER DATE : May 29, 2019

ORDER TIME : 9:18 AM

ORDER NO. : 783288-001

CUSTOMER NO: 7842417

FILED  
2019 JUN 13 PM 4:39  
TALLAHASSEE, FLORIDA

FOREIGN FILINGS

NAME: O'GORMAN PROPERTIES, INC.

☒ QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY  
☒ PLAIN STAMPED COPY  
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lydia Cohen -- EXT# 62974

EXAMINER: \_\_\_\_\_

**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.*

O'GORMAN PROPERTIES, INC.

1.

(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)

New Jersey

90-0003078

2.

(State or country under the law of which it is incorporated)

3.

(FEI number, if applicable)

12/27/2001

4.

(Date of incorporation)

5.

(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)

160 State Route 35, Cliffwood Beach, NJ 07735

7.

(Principal office address)

(Current mailing address, if different)

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

Name:

Corporation Service Company

Office Address:

1201 Hays Street

Tallahassee

, Florida 32301

(City)

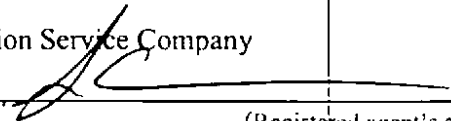
(Zip code)

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.*

Corporation Service Company

By:



(Registered agent's signature)

Lydia Cohen  
Asst. Vice President

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**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Kevin O'Gorman

Address: 160 State Route 35

Cliffwood Beach, NJ 07735

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Kevin O'Gorman

Address: 160 State Route 35

Cliffwood Beach, NJ 07735

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.

13. Kevin O'Gorman, President

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

FILED  
2010 JUN 13 PM 4:39  
TALLAHASSEE, FLORIDA

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

O'GORMAN PROPERTIES, INC.  
0100867611

*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 December 27, 2001.*

*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:*

KEVIN O'GORMAN  
160 STATE ROUTE 35  
CLIFFWOOD BEACH, NJ 07735



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and affixed  
my Official Seal at Tallahassee, Florida,  
10th day of June, 2019.

Elizabeth Maher Muoio  
State Treasurer

Certificate Number : 6098082051

Verify this certificate online at

[https://www1.state.nj.us/TYTR\\_StandingCert/JSP/Verify\\_Cert.jsp](https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp)

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