

Division of Corporations

Page 1 of 4

F1900005394
Florida Department of State
Division of Corporations
Filing Services

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.

(((H19000351432 3)))



H190003514323ABC

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 : (850)617-6383

From:

Account Name : API PROCESSING
Account Number : I20110000069
Phone : (954)367-0013
Fax Number : (954)567-3401

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

Email Address: Kelly@apiprocessing.com

FOREIGN PROFIT/NONPROFIT CORPORATION
Jet Installations Inc

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

T GLASS

DEC 06 2019

H19/MS35/432 3

Rgo 2 of 4

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.

Jet Installations 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)

2. New York 3. 14-1980623
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. October 10, 2006 5. Perpetual
(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. 78 Lafayette Avenue, Suite 209, Suffern, NY 10901
(Principal office address)
- 78 Lafayette Avenue, Suite 209, Suffern, NY 10901
(Current mailing address, if different)

2019 Dec -5 11:12:53

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

Name: API Processing - Licensing, Inc.

Office Address: 3419 Galt Ocean Drive, Suite A

Fort Lauderdale, Florida 33308
(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.



(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.

H19/MS35/432 3

HF000351432 3

Page 3 of 4

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Lawrence B. SilbermanAddress: 78 Lafayette Avenue, Suite 209, Suffern, NY 10901Vice President: Bruce H. GinsbergAddress: 78 Lafayette Avenue, Suite 209, Suffern, NY 10901


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.

Lawrence B. Silberman, President

13. _____

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

H19000351432 3
Page 4664**State of New York**
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of JET INSTALLATIONS INC was filed on 10/10/2006, 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.



2019 DEC -5

2019 DEC -5 PM12:53

WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 26th day of November two
thousand and nineteen.

A handwritten signature in cursive script, reading "Brendan C. Hughes".

Brendan C Hughes
Executive Deputy Secretary of State