

F20000000208

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

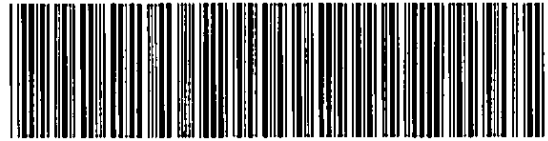
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100337858081

12/16/19--01002--030 **70.00

2019 DEC 16 11:12:46

T GLASS

JAN 14 2020

COVER LETTER

TO: Registration Section
Division of Corporations
AXISPOINT TECHNOLOGY SOLUTIONS GROUP, INC.

SUBJECT: _____
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:
ALICE PAN

	Name of Person
AXISPOINT TECHNOLOGY SOLUTIONS GROUP, INC.	
	Firm/Company
1 PENN PLAZA SUITE 3308	
	Address
NEW YORK NY 10119	
	City/State and Zip code
ALICE.PAN@SHOREGROUP.COM	
E-mail address: (to be used for future annual report notification)	

2013-02-16 PM 12:46

For further information concerning this matter, please call:

ALICE PAN	212	364-6757		
_____	at (____)	_____	_____	_____
Name of Person	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.

AXISPOINT TECHNOLOGY SOLUTIONS GROUP, INC.

1. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

ATSG, INC.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) NEW YORK 46-4334475

2. (State or country under the law of which it is incorporated) DECEMBER 16, 2013 3. (FEI number, if applicable)

4. (Date of incorporation) JANUARY 1, 2020 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) 507 N STATE RD BRIARCLIFF MANOR NY 10510-1511

7. (Principal office address) I PENN PLAZA SUITE 3308 NEW YORK NY 10119 (Current mailing address, if different)

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

Name: UNITED CORPORATE SERVICES, INC. Office Address: 9200 S DADELAND BLVD. SUITE 508 MIAMI, Florida 33156 (City) (Zip code)

2019 Dec 16 11:12:46

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.

DocuSigned by: Marie R. Frischetti 12/5/2019 (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.

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

A. DIRECTORS

CHUCK AUSTER

Chairman: _____

507 N STATE RD

Address: _____

BRIARCLIFF MANOR NY 10510-1511

FRANK SCANGA

Vice Chairman: _____

507 N STATE RD

Address: _____

BRIARCLIFF MANOR NY 10510-1511

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

ANTHONY J. D'AMBROSI

President: _____

507 N STATE RD

Address: _____

BRIARCLIFF MANOR NY 10510-1511

Vice President: _____

Address: _____

RONALD F. ZAMPOLIN

Secretary: _____

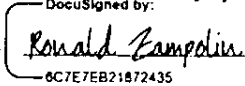
507 N STATE RD BRIARCLIFF MANOR NY 10510-1511

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12  6C7E7EB21872435

12/6/2019

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.

RONALD F ZAMPOLIN CFO

13. _____

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

State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of AXISPOINT TECHNOLOGY SOLUTIONS GROUP, INC. was filed on 12/16/2013, 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 16 PM 12:46

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 27th day of November two thousand and nineteen.

Brendan C. Hughes

*Brendan C Hughes
Executive Deputy Secretary of State*