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(Business Entity Name)						
(Document Number)						
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COVER LETTER

TO:			rporations					
SUBJ	ECT:	AXISPO		LOGY SOLUT				
			N	ame of corpor	ation - n	nust include suffix		
Dear S	Sir or M	adam:						
"Certi:	ficate o	f Existenc	e," or "Certi		l Standir	thorization to Transa ng" and check are sul in Florida.		
Please ALICE		all corres	pondence coi	ncerning this n	natter to	the following:		
AXISP	OINT T	ECHNOL	ogy solut	Nam TONS GROUP.	ne of Per INC.	son		201911-3-16
				Firm	/Compa	ny		
1 PEN	N PLAZ	A SUITE	3308					91.
NEW YORK NY 10119							i.: 15:	
ALICE	E.PAN@	SHOREG	ROUP.COM	City/St	ate and	Zip code		<u> </u>
		· · ·	E-mail ac	ldress: (to be t	ised for	future annual report	notification)	
For fu	rther int	formation	concerning	this matter, ple	ease call	:		
ALICE PAN 212						364-6757		
	Name	e of Perso	n	at (Area	Code	Daytime Telep	phone 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		
Enclos	ed is a	check for	the followin	g amount:				
\$ 70).00 Fil	ing Fee		Filing Fee & cate of Status		78.75 Filing Fee & Certified Copy	S87.50 Filin Certificate of Certified Co	of Status &

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) 46-4334475 2. (FEI number, if applicable) (State or country under the law of which it is incorporated) DECEMBER 16, 2013 (Date of incorporation) (Date of duration, if other than perpetual) JANUARY 1, 2020 (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 (Principal office address) LPENN 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) UNITED CORPORATE SERVICES, INC. Name: 9200 S DADELAND BLVD, SUITE 508 Office Address: MIAMI (City) 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. 12/5/2019

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.

(Registered agent's signature)

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

A. DIRECTORS CHUCK AUSTER						
Chairman:						
Address:						
BRIARCLIFF MANOR NY 10510-1511						
FRANK SCANGA						
Vice Chairman: 507 N STATE RD	 					
Address: BRIARCLIFF MANOR NY 10510-1511						
DRIANGERT MANOR NT 10310-1311						
Director:						
Address:						
Director:						
Address:						
B. OFFICERS ANTHONY J. D'AMBROSI						
President:						
507 N STATE RD Address:	20					
BRIARCLIFF MANOR NY 10510-1511	0 0					
	· · · · · · · · · · · · · · · · · · ·					
Vice President:						
Address:						
	12:					
RONALD F. ZAMPOLIN	بت					
Secretary:						
Address:	<u> </u>					
Treasurer:						
Address:						
	dla- directore					
NOTE: If necessary, you may attach an addendum to the application listing additional officers and 12/6/2019	d/of directors.					
12 Rouald Eampolin. 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	he 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.



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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.

Braden C Hylan

Brendan C Hughes
Executive Deputy Secretary of State