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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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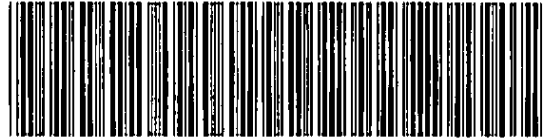
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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S. FRANKLIN

OCT 17 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CRIMKAV CORP.

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:

J. Knox Burns, IV, Esq.

Name of Person

Cauthen & Burns, P.A.

Firm/Company

215 North Joanna Avenue

Address

Tavares, Florida 32778

City/State and Zip code

jknoxburns@cflegal.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jennifer Conroy

at (352) 343-2225

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- | | | | |
|--|--|---|---|
| <input checked="" type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &
Certified Copy | <input type="checkbox"/> \$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.*

1. CRIMKAV CORP
(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 Jersey 3. 22-3042236
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. April 10, 1990 5. _____
(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. 830 Morris Turnpike, Short Hills, New Jersey 07078
(Principal office street address)

(Current mailing address, if different)

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

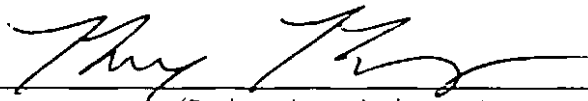
Name: J. Knox Burns, IV

Office Address: 215 North Joanna Avenue

Tavares, Florida 32778
(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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

☒ Chairman Name: Kenneth F. Crimmins
☐ Vice Chairman Address: 830 Morris Turnpike
☒ Director Short Hills, New Jersey 07078
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☒ Other CEO _____ ☐ Other _____

☐ Chairman Name: Charles T. Kavanagh
☐ Vice Chairman Address: 830 Morris Turnpike
☒ Director Short Hills, New Jersey 07078
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☒ Other EVP _____ ☐ Other _____

☐ Chairman Name: Jason M. Crimmins
☐ Vice Chairman Address: 830 Morris Turnpike
☒ Director Short Hills, New Jersey 07078
☒ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other _____ ☐ Other _____

☐ Chairman Name: Sheryl L. Crimmins
☐ Vice Chairman Address: 830 Morris Turnpike
☒ Director Short Hills, New Jersey 07078
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☒ Treasurer _____
☐ Other _____ ☐ Other _____

☐ Chairman Name: Alessandro Conte
☐ Vice Chairman Address: 830 Morris Turnpike
☒ Director Short Hills, New Jersey 07078
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☒ Other EVP _____ ☐ Other _____

☐ Chairman Name: Christian Walsifer
☐ Vice Chairman Address: 830 Morris Turnpike
☒ Director Short Hills, New Jersey 07078
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. Sheryl L. Crimmins
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. Sheryl L. Crimmins
(Typed or printed name and capacity of person signing application)

**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
LONG FORM STANDING WITH OFFICERS AND DIRECTORS**

CRIMKAY CORP.
0100448116

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 10, 1990.

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:

JASON SOBEL, ESQ
THE LEGAL CENTER
ONE RIVERFRONT PLAZA
NEWARK, NJ 07102

I further certify that as of the date of this certificate, the following were listed as officers/directors of this business on the last Annual Report filed in this office on January 27, 2022.

CHIEF EXEC. OFFICER (CEO)	KENNETH F CRIMMINS 830 MORRIS TURNPIKE, 2ND FL SHORT HILLS, NJ 07078
PRESIDENT	JASON M CRIMMINS 830 MORRIS TURNPIKE, 2ND FL SHORT HILLS, NJ 07078
TREASURER	SHERYL L CRIMMINS 830 MORRIS TURNPIKE, 2ND FL SHORT HILLS, NJ 07078
VICE PRESIDENT	CHARLES T KAVANAGH 830 MORRIS TURNPIKE, 2ND FL SHORT HILLS, NJ 07078

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**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
LONG FORM STANDING WITH OFFICERS AND DIRECTORS**

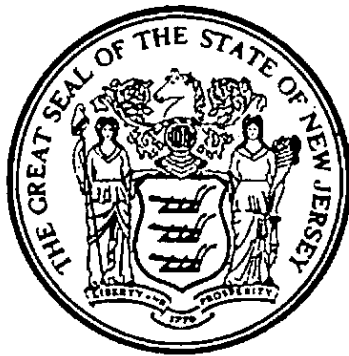
CRIMKAY CORP.
0100448116

VICE PRESIDENT

Alessandro Conte
830 Morris Turnpike 2nd Fl
2nd Floor
Short Hills, NJ 07078-0707

OTHER

Christian Walsifer
830 Morris Turnpike 2nd Fl
2nd Floor
Short Hills, NJ 07078-0707



IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed
my Official Seal at Trenton, this
30th day of September, 2022

Elizabeth Maher Muoio
State Treasurer

Certificate Number : 6136323978

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

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