

# F95000000749

## TRANSMITTAL LETTER

TO: QUALIFICATION/TAX LIEN SECTION  
DIVISION OF CORPORATIONS

RECEIVED  
QUALIFICATION/TAX LIEN SECTION  
DIVISION OF CORPORATIONS  
FEB 15 11 08 18

SUBJECT: Lachance Group, Inc.  
(Name of corporation - must include suffix)

Dear Sir or Mad'am:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", 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:

Lionel Reifler  
(Name of Person)  
Lachance Group, Inc.  
(Firm/Company)  
6000 Park of Commerce Blvd.  
(Address)  
Boca Raton, FL 33487  
(City, State and Zip Code)

400001406134  
-02/14/95--01095--013  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Should you need to call someone concerning this matter, please call:

Howard Ackerman at (407) 241 - 3800  
(Name of Person) Area Code & Daytime Telephone Number

### COURIER ADDRESS:

Qualification/Tax Lien Sec.  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

### MAILING ADDRESS:

Qualification/Tax Lien Sec.  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

**IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS  
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACTION BUSINESS IN THE  
STATE OF FLORIDA:**

1. Lachance Group, Inc.  
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Delaware 3. 65-0550223  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. January 17, 1995 5. Perpetual  
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. No Transactions To Date  
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 607.155, F.S.))
7. 6000 Park of Commerce Blvd  
Boca Raton, FL 33487  
(Current mailing address)
8. Investments  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

**9. Name and street address of Florida registered agent:**

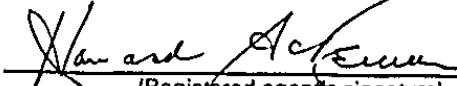
Name: Registration Corporation Of Florida Inc.

Office Address: 22422 Thousand Pines Lane

Boca Raton, Florida, 33428  
(Zip Code)

**10. 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)

11. 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.

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: Lionel Reifler

Address: 6000 Park of Commerce Blvd.

Boca Raton, FL 33487

Vice Chairman: Susan Lachance Reifler

Address: 6000 Park of Commerce Blvd.

Boca Raton, FL 33487

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

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

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

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

B. OFFICERS

President: Lionel Reifler

Address: 6000 Park of Commerce Blvd.

Boca Raton, FL 33487

Vice President: \_\_\_\_\_

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

Secretary: Susan Lachance Reifler

Address: 6000 Park of Commerce Blvd.

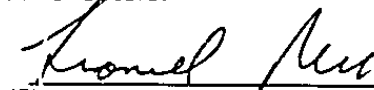
Boca Raton, FL 33487

Treasurer: \_\_\_\_\_

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

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

13.



(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14.

Lionel Reifler, Director/President

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

State of Delaware  
Office of the Secretary of State

NOTICE IS HEREBY GIVEN THAT THE following is a true and correct copy of the original as the same appears in the records of the Secretary of State of the State of Delaware.

THE following is a true and correct copy of the original as the same appears in the records of the Secretary of State of the State of Delaware.

AND I HEREBY CERTIFY FURTHER THAT THE foregoing is a true and correct copy of the original as the same appears in the records of the Secretary of State of the State of Delaware.

SECRET  
DIVISION OF RECORDS  
55 FEB 15 AM 9:18



*Edward J. Gault*

Edward J. Gault, Secretary of State

NOTARY ATTESTATION

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