TO: Qualification/Tax Lien Section **Division of Corporations** MANUFACTURERS MARKETING GROUP (Name of corporation - must include suffix) <u>(70.</u> SUBJECT: Dear Sir or Madam: 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. Was -17159 Please return all correspondence concerning this matter to the following: JAY MENACHEM (Name of Person) CPA MENACHEM JAY (Firm/Company) MADISON AVE # 1225 3/0 (Address) 10017 NEW YORK NΥ City/State/Zip) 1 au A9|4 Should you need to call someone concerning this matter, please call:

_ at (2/2) 682-8600 (Area Code & Daytime Telephone Number) JAY. MENACHEM (Name of Person)

COURIER ADDRESS:

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

MAILING ADDRESS:

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

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	MANUFACTURERS MARKETING GROUP LTD., INC.
• •	<u>MANUFACTURERS</u> <u>MARKETING</u> <u>GROUP</u> LTD. <u>INC</u> . (Name of corporation: must include the word "INCORPORATIOD", "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	NEW YORK 3. 13-383-580 (State or country under the law of which it is incorporated) 3. (FEI number, if applicable)
4.	(State or country under the law of which it is incorporated) 3. (Fill number, if applicable)
4	May 17 1995 (Date of Incorporation) 5. <u>PERPETUAL</u> (Duration: Year corp. will cease to exist or "perpetual")
τ.	(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
б.	(Date first transacted business in Florida, (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)
	(Date first transacted business in Florida, (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)
7.	
	(Current mailing address)
	(Current maning address)
8.	MANUFACTURERS REPRESENTATIVE FOR GARMENTS
	(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: (P.O. Box or Mail Drop Box NOT acceptable)

Name: YOLANDE S. EAGLE 17322 VENTINA DRIVE Office Address: ____ BOCA RATON, Florida, 33487

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.



 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.

	RS (Street address only- P. O . Box NOT acceptable)
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Address:	
Director:	
	(Street address only- P. O. Box NOT acceptable)
B. OFFICERS President:	
B. OFFICERS President: Address:	(Street address only- P. O. Box NOT acceptable) <u>MARK</u> <u>A. HIRSH</u> 1077 RIVER RD.
B. OFFICERS President: Address: Vice President: _ Address:	(Street address only- P. O. Box NOT acceptable) <u>MARK A. HIRSH</u> 1077 RIVER RD. EDGEMTER NJ 07020 YULANDE S. EAGLE 17322 VENTANA DRIVE
B. OFFICERS President: Address: Vice President: Address:	(Street address only- P. O. Box NOT acceptable) <u>MARK</u> <u>A.</u> <u>HIRSH</u> <u>IO77</u> <u>RIVER</u> <u>RD</u> . <u>EDFEMITER</u> <u>NJ</u> <u>O7020</u> <u>YULANDE</u> <u>S. EAFLE</u>
B. OFFICERS President: Address: Vice President: _ Address:	(Street address only- P. O. Box NOT acceptable) <u>MARK A. HIRSH</u> 1077 RIVER RD. EDGEMTER NJ 07020 YULANDE S. EAGLE 17322 VENTANA DRIVE
B. OFFICERS President: Address: Vice President: _ Address: Secretary: Address:	(Street address only- P. O. Box NOT acceptable) <u>MARK A. HIRSH</u> 1077 RIVER RD. EDGEMTER NJ 07020 YOLANDE S. EAGLE 17322 VENTANA DRIVE BOCA RATON, FL 33487
B. OFFICERS President: Address: Vice President: _ Address: Secretary: Address:	(Street address only- P. O. Box NOT acceptable) <u>MARK A. HIRSH</u> 1077 RIVER RD. EDGEWATER NJ 07020 YOLANDE S. EAGLE 17322 VENTANA DRIVE BOCA RATON, FL 33487

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13. \times () la de X () e P (Signature of Chairman, Vige Chairman, or any officer listed in number 12 of the application) 14. \times Volande S. Engle V.P (Typed or printed name and capacity of person signing application)

State of New York | ss: Department of State

I hereby certify, that the certificate of incorporation of MANUFACTURERS MARKETING GROUP LTD. was filed on 05/12/1995, under the name of ENHANCEMENT REPRESENTATIVES, LTD., with perpetual duration, and that I have made a diligent examination of the index of corporation papers filed in this Department for a certificate, order, or record of a dissolution, and upon such examination, I find no such certificate, order or record, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

A Cortificate of Amendment ENHANCEMENT REPRESENTATIVES, LTD., changing name to MANUFACTURERS MARKETING GROUP LTD., was filed 05/17/1995.

Witness my hand and the official seal of the Department of State at the City I of Albany, this 16th day of August mone thousand nine hundred and 7 1 A lineth-five. $\frac{1}{2}$ F. Treachoeff 5 1 Secretarir of State MENI ()

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