

F96000003584  
TRANSMITTAL LETTER

TO: Qualification/Tax Lien Section  
Division of Corporations

100001895561  
-07/16/96--01183--006  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: Financial Planning Concepts of South Florida, Inc.  
(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", 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:

Jeffrey Cimbali  
(Name of Person)  
Financial Planning Concepts Inc.  
(Firm/Company)  
970 North Broadway  
(Address)  
Yonkers NY 10701  
(City/State/Zip)

9/7/16  
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Should you need to call someone concerning this matter, please call:

Jeffrey Cimbali  
(Name of Person) at ( 914 ) 969-3443  
(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 Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

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### RESOLUTION OF BOARD OF DIRECTORS

I, the undersigned Clifford W. Maher, do hereby certify  
that this Resolution of the Board of Directors of Financial Planning  
Concepts, Inc.  
a corporation duly organized and existing under the laws of the State of New York,  
was duly adopted on March 6, 1985.

Resolved, that Financial Planning Concepts Inc., organized  
and existing in the State of New York, hereby adopts the  
name Financial Planning Concepts of South Florida, Inc.  
for use in Florida.

Dated: 7/15/96

Clifford W. Maher  
Signature of at least one director

INHS19(3/95)

**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. Financial Planning Concepts, 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. New York  
(State or country under the law of which it is incorporated)
3. 13-3259619  
(FBI number, if applicable)
4. 3/6/85  
(Date of Incorporation)
5. "Perpetual"  
(Duration: Year corp. will cease to exist or "perpetual")
6. 8/1/96  
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. 970 North Broadway  
Yonkers NY 10701  
(Current mailing address)
8. Financial Planning and Tax Advisory  
(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: Clifford W Maher

Office Address: 2658 Bayview Dr

Et Lauderdale, Florida, 33306  
(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.

Clifford W Maher  
(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.

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12. Names and addresses of officers and/or directors: (Street address **ONLY**- P. O. Box **NOT** acceptable)

A. **DIRECTORS** (Street address only- P. O. Box **NOT** acceptable)

Chairman: Clifford W. Maher

Address: 2658 Bayview Dr.  
Et Landerdale Fl 33306

Vice Chairman: \_\_\_\_\_

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

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

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

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

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

B. **OFFICERS** (Street address only- P. O. Box **NOT** acceptable)

President: Clifford W. Maher

Address: 2658 Bayview Dr.  
Et Landerdale Fl 33306

Vice President: Same

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

Secretary: Same

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

Treasurer: Same

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

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

13. Clifford W. Maher  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

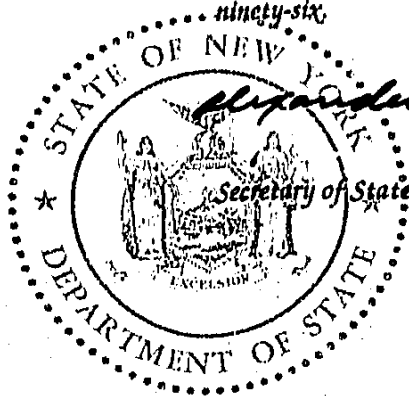
14. Clifford W. Maher  
(Typed or printed name and capacity of person signing application)

**State of New York** | ss:  
**Department of State**

I hereby certify, that the certificate of incorporation of FINANCIAL PLANNING CONCEPTS, INC. was filed on 03/06/1985, 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.

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Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 10th day of July  
one thousand nine hundred and  
ninety-six.



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