

# F980000000286

CAPITOL SERVICES d/b/a  
PARALEGAL & ATTORNEY SERVICE BUREAU, INC.

(Requestor's Name)

1406 Hays Street, Suite 2

(Address)

Tallahassee, FL 32301 (904) 656-3992

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

000002338610--5

-11/05/97--01033--022

\*\*\*\*\*70.00 \*\*\*\*\*70.00

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Helmsley-Spear, Inc (Corporation Name) W97-25122 (Document #)

2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

☒ Walk in

☒ Pick up time 11:15

☐ Certified Copy

☐ Mail out

☐ Will wait

☒ Photocopy Stamped

☐ Certificate of Status

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 JAN 16 PM 3:45

RECEIVED  
97 NOV -5 PM 11:08  
DIVISION OF CORPORATION

| NEW FILINGS              |                   |
|--------------------------|-------------------|
| <input type="checkbox"/> | Profit            |
| <input type="checkbox"/> | NonProfit         |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication     |
| <input type="checkbox"/> | Other             |

| AMENDMENTS               |                                       |
|--------------------------|---------------------------------------|
| <input type="checkbox"/> | Amendment                             |
| <input type="checkbox"/> | Resignation of R.A., Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent            |
| <input type="checkbox"/> | Dissolution/Withdrawal                |
| <input type="checkbox"/> | Merger                                |

| OTHER FILINGS            |                  |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report    |
| <input type="checkbox"/> | Fictitious Name  |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/<br>QUALIFICATION      |                     |
|-------------------------------------|---------------------|
| <input checked="" type="checkbox"/> | Foreign             |
| <input type="checkbox"/>            | Limited Partnership |
| <input type="checkbox"/>            | Reinstatement       |
| <input type="checkbox"/>            | Trademark           |
| <input type="checkbox"/>            | Other               |

Same as  
835087

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

November 5, 1997

CAPITOL SERVICES

SUBJECT: HELMSLEY-SPEAR, INC.  
Ref. Number: W97000025122

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We have received your document for HELMSLEY-SPEAR, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

It appears that this corporation is already on file with our office. Please see attached printout.

If you have any questions concerning the filing of your document, please call (850) 487-6095.

Jennifer Sindt  
Document Examiner

Letter Number: 497A00053521

*Karen Gibson  
informed me a  
name change was  
needed and to  
proceed with  
this filing.*

**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. HELMSLEY-SPEAR, INC.  
(Name of corporation: the word "INCORPORATED", "COMPANY", or  
"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. 09/03/97 4. PERPETUAL  
(Date of Incorporation) (Duration)
5. 13-3965748  
(Federal Employer Identification Number, if applicable)
6. UPON QUALIFICATION  
(Date first transacted business in Florida. See sections 607.1501, 607.1502, and  
817.155, F.S.)
7. 60 EAST 42ND STREET, NEW YORK, NY 10165  
(Current Mailing Address)
8. REAL ESTATE MANAGEMENT  
(Brief description of the nature of the business in which it is engaged in the State of  
Florida.)
9. Names and addresses of officers and/or directors:  
A: Directors:  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Vice Chairman:

Address:

Director:

ALVIN SCHWARTZ

Address:

60 EAST 42ND STREET, NEW YORK, NY 10165

Director:

IRVING SCHNEIDER

Address:

60 EAST 42ND STREET, NEW YORK, NY 10165

**B. Officers:**

CHAIRMAN

ALVIN SCHWARTZ

Address:

60 EAST 42ND STREET, NEW YORK, NY 10165

CO-CHAIRMAN &  
CHIEF OPERATIONS  
OFFICER

IRVING SCHNEIDER

Address:

60 EAST 42ND STREET, NEW YORK, NY 10165

Secretary & TREASURER ROBERT HECHT

Address:

60 EAST 42ND STREET, NEW YORK, NY 10165

Treasurer:

Address:

(If needed, you may attach an addendum to the application listing additional officers and/or directors.)

**10. NAME AND STREET ADDRESS OF FLORIDA REGISTERED AGENT:**

Name:

National Corporate Research, Ltd., Inc.

Office Address:

1406 Hays Street, Suite #2

Tallahassee, Florida 32301

(Zip Code)

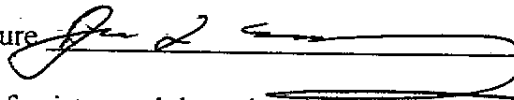
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DIVISION OF CORPORATIONS

11. **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



John Morrissey  
Asst VP

12. 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.

13.



(Signature of Chairman, Vice Chairman, or any officer listed in Number 9 of the application)

14.

IRVING SCHNEIDER, CO-CHAIRMAN AND CHIEF OPERATIONS OFFICER  
(Name and capacity of the person signing the application)

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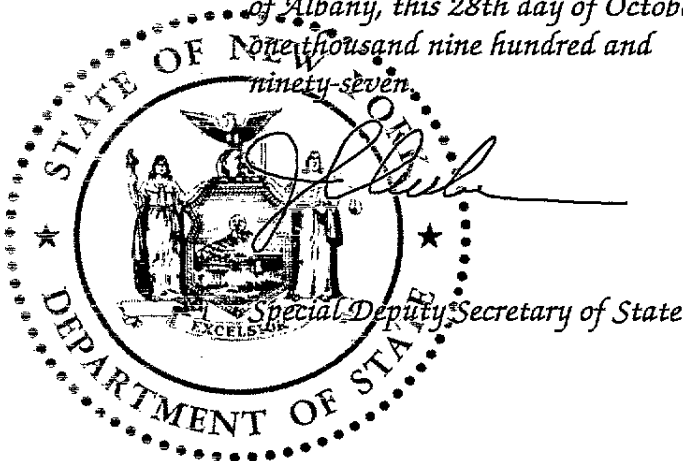
**State of New York** } **ss:**  
**Department of State**

I hereby certify, that the certificate of incorporation of HELMSLEY-SPEAR, INC. was filed on 09/03/1997, under the name of H S ACQUISITION CORPORATION, with perpetual duration, and that a diligent examination has been made of the index of corporation papers filed in 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 a subsisting corporation.

A Certificate of Amendment H S ACQUISITION CORPORATION, changing name to HELMSLEY-SPEAR, INC., was filed 09/26/1997.

\*\*\*

Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 28th day of October  
of the year of our Lord one thousand nine hundred and  
ninety-seven.



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