

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: PROFESSIONAL COMPUTER SOLUTIONS, 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:

ANNA CICCIAGLIONE
(Name of Person)

PCS, INC.
(Firm/Company)

3 UNIVERSITY PLAZA, SUITE 600
(Address)

HACKENSACK, NJ 07601
(City/State/Zip)

800002736658--4
-01/11/99-01099-015
*****87.50 *****87.50

W99-812

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

ANNA CICCIAGLIONE at (201) 488-7222 x124
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section
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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

January 12, 1999

ANNA CICCAGLIONE
PCSI, INC.
3 UNIVERSITY PLAZA, SUITE 600
HACKENSACK, NJ 07601

SUBJECT: PROFESSIONAL COMPUTER SOLUTIONS, INC.
Ref. Number: W99000000812

We have received your document for PROFESSIONAL COMPUTER SOLUTIONS, INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6958.

Lee Rivers
Document Specialist

Letter Number: 199A00001441

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned BEN TANDOWSKI, do hereby certify
(Name)

that this Resolution of the Board of Directors of PROFESSIONAL COMPUTER
SOLUTIONS, INC.
(Corporate Name)

a corporation duly organized and existing under the laws of the State of NEW YORK,
was duly adopted on 5/1, 19 85.

Be it resolved, that PROFESSIONAL COMPUTER SOLUTIONS, INC.,
(Corporate Name)

organized and existing in the State of NEW YORK, hereby adopts the name
PCSI, INC. for use in Florida.

Dated: 1/19/99

Ben Tandowski, PRES.

Signature of either Chairman, Vice Chairman or any officer

BEN TANDOWSKI

Type or print name

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TALLAHASSEE FLORIDA

**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. PROFESSIONAL COMPUTER SOLUTIONS, 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 3. 13-3276-922
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 5/1/85 5. N/A
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 1/1/99
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 3 UNIVERSITY PLAZA, SUITE 600
HACKENSACK, NJ 07601-6223
(Current mailing address)

8. EMPLOYEE MOVED TO STATE OF FLA WILL WORK OUT OF HOME.
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)


Name: PAUL BIENICK

Office Address: 4040 CROCKERS LAKE BLVD., APT. 1714
SARASOTA, Florida, 34238
(Zip code)

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TALLAHASSEE FLORIDA

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: (Street address **ONLY** - P.O. Box **NOT** acceptable)

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

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: BENJAMIN TANDOWSKI

Address: 241 ALPINE ROAD

PARAMUS, NJ 07652

Director: _____

Address: _____

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

President: BENJAMIN TANDOWSKI

Address: 241 ALPINE ROAD

PARAMUS, NJ 07652

Vice President: ANDREW WRIGHT

Address: 1666 LAKE ROAD

BASKING RIDGE, NJ 07920

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

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

14. BENJAMIN TANDOWSKI
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE FLORIDA

State of New York } ss:
Department of State

I hereby certify, that the certificate of incorporation of PROFESSIONAL COMPUTER SOLUTIONS, INC. was filed on 04/19/1985, 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. I further certify the following:

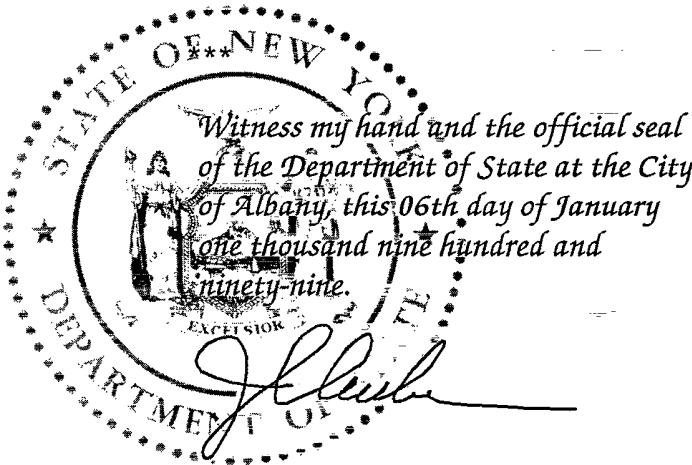
A Certificate of Merger was filed on 04/28/1997.

A Biennial Statement was filed 07/24/1997.

Certificate of change was filed on 02/17/1998.

A Certificate of Merger was filed on 06/05/1998.

I further certify, that no other certificates have been filed by such corporation.



Special Deputy Secretary of State

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TALLAHASSEE FLORIDA

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