

F99000000734

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: CALLOWAY FUNDRAISING, INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

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-02/08/99-01084-002

*****87.50 *****87.50

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:

Craig HACK

(Name of Person)

Calloway Fundraising Inc.

(Firm/Company)

Current

AS of March 2nd 1999
5138 Misty Morn Rd.
Palm beach gardens
FL, 33410

101 Meadow Lane, Nanuet NY, 10954
(Address)

(City/State/Zip)

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

Craig HACK

(Name of Person)

at 914) 352-5227

(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

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DIVISION OF CORPORATIONS
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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

**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. CALLOWAY FUNDRAISING 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. 133906690
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 9-5-96 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 101 MEADOW LANE
NANUET, NY 10954
(Current mailing address)

8. FUNDRAISING
(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: Craig Hack

Office Address: 5138 Misty more Rd.
PAImbeach FL, 33410, Florida, 33410
(Zip code)

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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.

Craig Hack
(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: CRAIG HACK 3/2/99
Address: 101 MEADOW LANE 5138 Misty Morn Rd
NANUET, NY 10954 Palm Beach Gardens, FL
Vice Chairman: 33410

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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

President: Craig Hack AS OF March 2nd 1999.
Address: 101 MEADOW LANE 5138 Misty Morn Rd.
NANUET NY, 10954 PAIMbeach FL, 33410

Vice President: _____

Address: _____

Secretary: ALISON HACK 3/2/99
Address: 101 MEADOW LANE 5138 MISTY MORN RD
NANUET, NY 10954 PALM BEACH GARDENS,
Treasurer: FL 33410

Address: _____

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

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

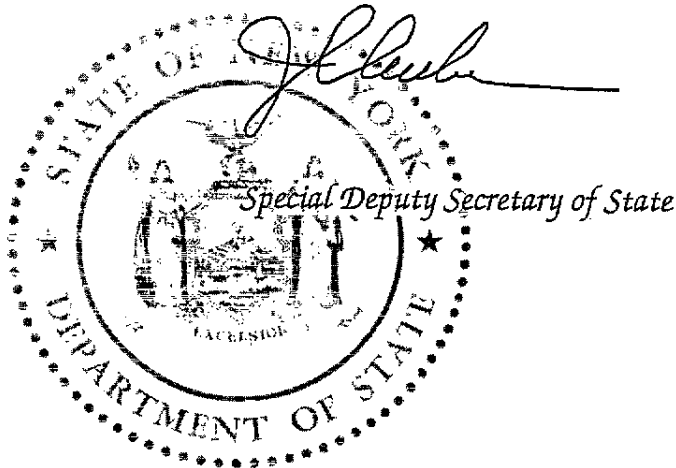
14. CRAIG M. HACK
(Typed or printed name and capacity of person signing application)

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

I hereby certify, that the certificate of incorporation of CALLOWAY FUNDRAISING, INC. was filed on 09/05/1996, 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.

*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 20th day of January
one thousand nine hundred and
ninety-nine.*

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