

F990000001829

TRANSMITTAL LETTER

TO: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: THOMAS F. O'CONNOR 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:

W99-7408

THOMAS F. O'CONNOR

(Name of Person)

THOMAS F. O'CONNOR INC.

(Firm/Company)

425, 4TH TERRACE

(Address)

PALM BEACH GARDENS, FL 33418

(City/State/Zip)

800002820218--4

-03/26/99-01089-003

****78.75 *****78.75

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

THOMAS F. O'CONNOR

(Name of Person)

at (561) 775-5716

(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

99 APR -7 PM 3:21

FILED

W44/7



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

March 29, 1999

THOMAS F. O'CONNOR
THOMAS F. O'CONNOR, INC.
425 4TH TERRACE
PALM BEACH GARDENS, FL 33418

SUBJECT: THOMAS F. O'CONNOR, INC.
Ref. Number: W99000007408

We have received your document for THOMAS F. O'CONNOR, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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: 499A00015596

April 1, 1999

Pursuant to above, I have signed the enclosed document on line 13, indicating capacity on line 14.

Please note there is no comma in Thomas F O'Connor Inc.

Please note correction in address. There is no comma after 425.

FT

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. THOMAS F. O'CONNOR, 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. 16-1542785

(FEI number, if applicable)

4. 01/05/1998

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. Jan. 1, 1999

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

7. 425, 4TH TERRACE

PALM BEACH GARDENS, FL 33418

(Current mailing address)

8. To engage in any lawful act or activity for which corporations may be formed
(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: THOMAS F. O'CONNOR

Office Address: 425, 4TH TERRACE

PALM BEACH GARDENS

, Florida, 33418
(Zip Code)

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SECRETARY OF STATE
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.

Thomas F O Connor
(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: _____

Address: _____

Director: _____

Address: _____
_____**B. OFFICERS (Street address only - P.O. Box NOT acceptable)**President: THOMAS F. O'CONNORAddress: 425 4TH TERRACEPALM BEACH GARDENS, FLORIDA 33418

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

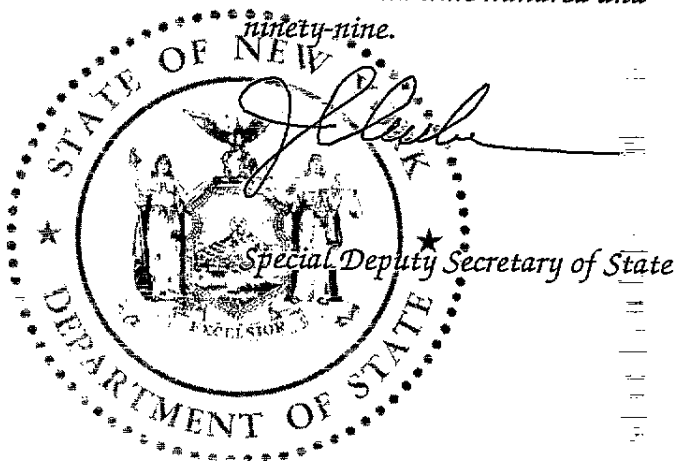
Address: _____
_____**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.13. Thomas F O'Connor
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)14. Thomas F. O'Connor, President
(Typed or printed name and capacity of person signing application)FILED
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

State of New York
Department of State } ss:

I hereby certify, that the certificate of incorporation of THOMAS F. O'CONNOR INC. was filed on 01/05/1998, 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, that no other certificates have been filed by such corporation.

Witness my hand and the official seal
of the Department of State at the City
of Albany, this 04th day of March
one thousand nine hundred and
ninety-nine.



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FILED
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SECRETARY OF STATE
TALLAHASSEE FLORIDA