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June 15, 1999

Department of State Division of Corporations 409 East Gaines Street Tallahassee, Florida 32399

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Re: ROGERS & CO., CPA'S, P.C.

Enclosed herein please find and original and (1) ONE copy of the Application by Foreign Corporation for Authorization to Transact Business in Florida for the above named New York entity. Enclosed please find a check made payable to Florida Department of State in the amount of \$70.00 for the corporate filing fees.

Please return proof of filing to this office in the enclosed Federal Express envelope for your convenience.

Thank you for giving this matter your attention.

Very, truly yours,

Lawrence A. K

LAK/ss Enc.

	
Name Availabi lity	MJH
Document Examiner	
Updater	
Updater Verifyer	·
• Acknowledgement	
W. P. Verifyer	

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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. Nogers & CPA's (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 lock (State or country under the law of which it is incorporated) 4. HG-9 (Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual") 6. G-2/-99
(Date first transacted business in Florida, (See sections 60/.1501, 60/.1502, and 81/.155, F.S.)
7. 100 EAST OCD (contray Kord) Mincola, NY ISO (Current mailing address) 8. Computer Consulting Grant Consulting (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Floridan (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Floridan (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Floridan (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Floridan (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Floridan (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Floridan (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Floridan (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Floridan (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Floridan (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Floridan (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Floridan (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Floridan (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Floridan (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Floridan (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Floridan (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Floridan (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Floridan (Purpose(s) of corporation authorized in home s
9. Name and street address of Florida registered agent: Name: Stephen M. Moso
Office Address: 1549 Ringling Blud #602 SANSOTA FLORAM, Florida, 34236 (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

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: DIRECTORS Chairman: Erie J. Rogers Vice Chairman: ______ Address: _____ Director: Address: _____ Director: __ Address: _____ **OFFICERS** В. President: Line J. Roser Address: 100 E. OCD Courses Roza Vice President: _____ Address: _ Secretary: Address: _____ Treasurer: _____ Address: _____ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

(Typed or printed name and capacity of person signing application)

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

State of New York State State

I hereby certify, that the certificate of incorporation of ROGERS & CO., CPA'S, P.C. was filed on 04/06/1995, 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 14th day of June one thousand nine hundred and ninety-nine.

Special Deputy Secretary of State

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