To: Qualification/Tax Lien Section

Division of Corporations SUBJECT: J. Alden Enterprises, Ltd. (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: Marcos R. Marchena (Name of Person) Marchena & Graham, P.A. (Firm/Company) 233 South Semoran Blvd. (Address) Orlando, FL 32807 (City/State/Zip) Should you need to call someone concerning this matter, please call: Marcos R. Marchena 1 658-8566. (Area Code & Daytime Telephone Number) (Name of Person) 700002915797 -06/25/99--01068-****175.00 *****87.50 STREET ADDRESS: **MAILING ADDRESS:** Qualification/Tax Lien Section Qualification/Tax Lien Section Division of Corporations Division of Corporations 409 E. Gaines St. P.O. Box 6327 Tallahassee, FL 32399 Tallahassee, FL 32314 Enclosed is a check for the following amount: ☐ \$70.00 Filing Fee □ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & \$87.50 Filing Fee, Certificate of Status Certified Copy 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.	(Name of corpor words or abbrev		ord "INCORPORATI nguage as will clearly	indic	COMPANY", "CORPORATION ate that it is a corporation inste	
2.	New York (State or country	under the law of which it	is incorporated)	3.	13-3906638 (FEI number, if appl	icable)
4.	.09/04/96		5. <u>perp</u>	etua	1	·*· :
6	(Dat June 30,	e of meorporation)	(Dur	ation:	Year corp. will cease to exist	or "perpetual")
٠.	(Date first	transacted business in Flo	rida.) (SEE SECTIO	NS 60	7.1501, 607.1502 and 817.155	, F.S.)
	454 W. 41	st Street				
/.	New York,	NY 10036				
		(C	urrent mailing addre	ss)		
8.		Commercial Space				7 ₅ 99
	(Purpose(s) of corporation authorize	d in home state or co	untry	to be carried out in state of Flo	rida) 🚅 💆 🗂
9.	Name and str	eet address of Florida	registered agent:	(P.O.	Box or Mail Drop Box NO	
	Name:	Marchena & Graham	1, P.A.			Fig. 3 O
O	ffice Address:	233 South Semorar	Blvd.			SEE FLERIE
		Orlando			, Florida,	A
					(Zip code)	
10). Registered a	ngent's acceptance:				
thi wi the	is application, I i th the provisions e obligations of i	hereby accept the appoints of all statutes relative to a my position as registered a	ment as registered as the proper and comp tegent. Registered agents si	gent a lete p	and agree to act in this capacity erformance of my duties, and	I am familiar with and accept
11 De	. Attached is a construction of State	ertificate of existence duly e. by the Secretary of State	authenticated, not me or other official hav	ore th ing cu	an 90 days prior to delivery of stody of corporate records in the	this application to the ne jurisdiction under the law of

which it is incorporated.

A. DIRECT	ORS (Street address only - P.O. Box NO (acceptable)	
Chairman:	Achille Raspantini	
Address:	454 West 41st Street	
<u></u>	New York, NY 10036	
Vice Chairm	an: Marion Respentini	
Address:	454 West 41st Street	
	New York, NY 10036	<u> </u>
Director:	N/A .	-
Address:		.e - 5
		· · · · · · · · · · · · · · · · · · ·
Director: N	/^	
Address:		<u> </u>
B. OFFIC	ERS (Street address only • P.O. Box NOT acceptable)	
	Achille Raspantini	
	454 West 41st Street	
	New York, NY 10036	7 99 7 99
	ent: Marion Raspantini	FEE LE T
	454 West 41st Street	35 B F
	New York, NY 10036	EFE E
Secretary:	N/A	31715 31715 05 :6
		<u> </u>
•••		
Treasurer:	N/A	
Address: _		
_		
NOTE: I	f necessary you may attach an addendum to the application listing additional officers and/or directors.	
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
14. Act	hille Raspantini, Chairman and President	
T.4.	(Typed or printed name and capacity of person signing application)	

State of New York Department of State

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I hereby certify, that the certificate of incorporation of J. ALDEN ENTERPRISES, LTD. was filed on 09/04/1996, 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.

N Eninety-nine.

Witness my hand and the official seal of the Department of State at the City of Albany, this 28th day of May one thousand nine hundred and

eputy Secretary of State

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SECRETARY OF STATE

SECRETARY OF STATE