# F03000001279

Ariel Partners, INC. (Requestor's Name)  1619 3 CL AVENUE Stettsky (Address)
1619 3 LAVENUE Ste#3KE
(Address)
(Address)
New York N.Y. 10128 (City/State/Zip/Phone #)
' (City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Duringer Fully Name)
(Business Entity Name)
(Document Number)
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### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Ariel Partners, INC.				
(Name of corporation - must include suffix)				
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Flo "Certificate of Existence", and check are submitted to register the above referenced foreign corp to transact business in Florida.				
Please return all correspondence concerning this matter to the following:	9	113		
Jeffrey R. LYNN (Name of Person)	3 15.	350		
(Name of Person)	<del>- = -</del>			
Ariel Partners, INC.	4	:  }  }		
(Firm/Company)	<del>-==</del>	<u>-</u> 중위		
1619 3rd Avenue Str. # 3KE	1:45	RATION		
(Address) New York, N.Y. 10128 (City/State and Zip code)		S.		
(City/State and Zip code)				
For further information concerning this matter, please call:				
(Name of Person) at (Z12) 987-8464 (Area Code & Daytime Telephone Number)	_			
STREET ADDRESS:  Registration Section  Division of Corporations  409 E. Gaines St.  Tallahassee, FL 32399  MAILING ADDRESS:  Registration Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314				
Enclosed is a check for the following amount:				
\$70.00 Filing Fee \$\ \times \	of Stat	:us &		

## 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.
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(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. = 74-3054712 (FEI number, if applicable)
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 6/11/02 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")
6. March 31, 2003 (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 1619 3rd Avenue Sto# 3RE NewYork, N.Y. 10128
(Principal office address)
Jame BS above
(Current mailing address)
8. Holding Company = = ================================
(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: Jeffrey R. LYNN 55 55 FM Office Address: 216 Horth Beach Street
Office Address: 216 Horth Beach Street
Daytona Beach, Florida 32/14 (City) (Zip code)
(City) (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 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.
Off R from

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 business addresses of officers and/or directors:

A. DIRECTORS	-00	
Chairman:	Jetfrey R. LYNY	
Address:	1619 3x4 Ave. Ste#3KE	
	Men York, M.Y. 70128	-
Vice Chairman:		
Address:		
<del></del>		
Director:		
Address:		
Director:		
Address:		
B. OFFICERS		SE NYISI NA SE
	JEBRIE R (VAIN	
President:	1619 3 1 Ave. Ste#3KE	- CRE
Address:		TORS
, <u>.</u>	New York, M.Y. 10128	- A - A - A - A - A - A - A - A - A - A
Vice President:		Š
Address:		
.,,		
Secretary:	= = = = = = = = = = = = = = = = = = = =	
Address:		
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		-1-
NOTE: If necessar	ry, you may attach an addendum to the application listing additional officers and/	or directors.
13	O. H.R. Line	nga
	gnature of Chairman, Vice Chairman, or any officer listed in number 12 of the ap	plication)
14	JEFFrey W. LYNN CEO, President	
	(Typed or printed name and capacity of person signing application)	

# State of New York Department of State State

I hereby certify, that the Certificate of Incorporation of ARIEL PARTNERS, INC. was filed on 06/11/2002, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with 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 26th day of February two thousand and three.

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