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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN FEB 20 2004

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TABS GROUP, 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:

KURT JETTA

(Name of Person)

TABS GROUP, INC.

(Firm/Company)

4 CORPORATE DRIVE, SUITE 186

(Address)

SHELTON, CT 06484

(City/State and Zip code)

For further information concerning this matter, please call:

KURT JETTA

(Name of Person)

at

(203) 925-9157

(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 ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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TALLAHASSEE, FLORIDA

**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. TABS GROUP, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.,"
"Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. CT

(State or country under the law of which it is incorporated)

3. 20-0557812

(FEI number, if applicable)

4. 01/01/2004

(Date of incorporation)

5. PERPETUAL

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

6. UPON QUALIFICATION

(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. 4 CORPORATE DRIVE, SUITE 186 SHELTON CT 06484

(Principal office address)

4 CORPORATE DRIVE, SUITE 186 SHELTON CT 06484

(Current mailing address)

8. SALES AND MARKETING CONSULTANTS

(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: MIKE KIRSHENBAUM

Office Address: 11266 NW 65 MANOR

PARKLAND

(City)

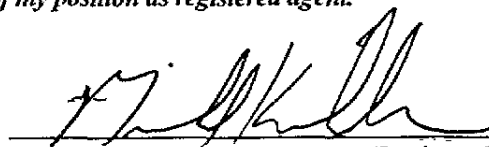
Florida

33076

(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.



(Registered agent's signature)

1/13/04

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

Chairman: KURT JETTA

Address: 4 CORPORATE DRIVE SUITE 186

SHELTON CT 06484

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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B. OFFICERS

President: KURT JETTA

Address: 4 CORPORATE DRIVE, SUITE 186

SHELTON CT 06484

Vice President: _____

Address: _____

Secretary: Bill Nolan

Address: 17 Captain's Way; East Bridgewater, MA 02333

Treasurer: _____

Address: _____

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

13. Kurt Jetta 01/12/04
(Signature of Director or Officer listed in number 12 of the application)

14. KURT JETTA, PRESIDENT
(Typed or printed name and capacity of person signing application)

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State,
and keeper of the seal thereof, DO HEREBY CERTIFY, that

TABS GROUP, INC.

incorporated under the laws of Connecticut is in existence.



Secretary of the State

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TALLAHASSEE, FLORIDA

Date Issued: January 29, 2004