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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: DABES Realty Co., Dic 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," or "Certificate of Good Standing" 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: MACK Schar H
DABES REALTY CO PACE
6202 14+ Ave
Brookly Ny 11218 City/State and Zip code
PSD AND LCoe Ad. C. E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Main School at (118) 236 - 6065 Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing 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 & \$78.75 Filing Fee & Certificate of Status Certified Copy \$87.50 Filing Fee, 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.

DABES	•		
1/ lx	ble in Florida, enter alternate corporate name adopte		. Florida)
State or country i	ander the law of which it is incorporated)	(FEI number, if applicable)	
APRIL 2	of interporation) 5. (Dur		
(Date	of incorporation) (Dur	ation: Year corp. will cease to exist or "per	rpetual"
	(Date first transacted business in Flori (SEE SECTIONS 607.1501 & 607.1502, F.		
6202-	- 14+ AVE Bracklyn	NY 11219	2
	(Principal office address)		άĊ
	SAME_		20
- · · ·	(Current mailing address)		
RE	Al Estate HolDing		
(Purpose(s) of corporation authorized in home state or country	to be carried out in state of Florida)	
Name and stree	et address of Florida registered agent: (P.O. Bo	x NOT acceptable)	
Name:	REGISTERED AGENTS INC.		
fice Address:	3030 N. Rocky Point Dr, STE 150A		
	Tampa	, Florida 33607	
	(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.

Dan Keen - President

(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.

A. DIRECTORS Chairman: Address: Vice Chairman: Address: Director: Address: Director: Address: B. OFFICERS President: Address: Vice President: Address: Address: Address: Address: NOTE: If necessary, you may attach an address than false stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	.12. Names and business addresses of officers and/or directors:
Address: Vice Chairman: Address: Director: Address: Director: Address: B. OFFICERS President: Address: Vice President: Address: Secretary: STEMEN	A. DIRECTORS
Vice Chairman: Address: Director: Address: Director: Address: B. OFFICERS President: Address: Vice President: Address: NOTE: If necessary, you may attach an address thum to the application 1 filing additional officers and/or directors. 13. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes	Chairman:
Vice Chairman: Address: Director: Address: Director: Address: B. OFFICERS President: Address: Vice President: Address: Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes	Address:
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a unit degree resony as provided for in 5.617.133, r.s.	are true and that he or she is aware that false information submitted in a document to the Department of State constitutes
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(Typed or printed name and capacity of person signing application)

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of DABES REALTY CO., INC. was filed on 04/25/1945, fixing the duration as perpetual, 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 an existing corporation.



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WITNESS my hand and the official seal of the Department of State at the City of Albany, this 31st day of January two thousand and fourteen.

Littliny Sicilian

Executive Deputy Secretary of State

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