

From: Robin O'Connor

Fax: (850) 473-0571

To: +1 904 176 381

Fax: +1 850 617 6381

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F14000001238

Florida Department of State

Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H14000065478 3)))



H140000654783ABC2

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To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : LICENSE EXAM SERVICES  
Account Number : I20120000042  
Phone : (941) 706-2336  
Fax Number : (866) 473-0571

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** ROBIN@NEEDFLORIDALICENSE.COM

**FOREIGN PROFIT/NONPROFIT CORPORATION**

**Taconic Builders Inc**

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$70.00

RECEIVED

14 MAR 19 PM 1:37

STATE  
SECRETARIES, FLORIDA  
TALLAHASSEE, FLORIDA

14 MAR 19 AM 11:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

# F14000001238



March 19, 2014

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

LICENSE EXAM SERVICES

SUBJECT: TACONIC BUILDERS INC  
REF: W14000017560

We have received your document for TACONIC BUILDERS INC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason  
Regulatory Specialist II

FAX Aud. #: H14000065478  
Letter Number: 514A00005920

**FAX****Date:** 03/19/2014**Pages including cover sheet:** 8

<b>To:</b>	+18506176381
<b>Phone</b>	
<b>Fax Number</b>	+18506176381

<b>From:</b>	Robin O'Connor
	License Exam Services
	4713 webber st
	sarasota
	FL 34232
<b>Phone</b>	+1 (941) 266-5625
<b>Fax Number</b>	(866) 473-0571

**NOTE:**

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Taconic Builders 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," 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:

Gerald Holbrook  
Name of Person  
Taconic Builders Inc  
Firm/Company  
125 Spencer Place  
Address  
Mamaroneck NY 10543  
City/State and Zip code  
Kiverson@taconicbuilders.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karen Iverson at 914, 517-4801  
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 & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, 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. Taconic Builders Inc  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. Connecticut 3. 13-3423760  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 1987 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 125 Spencer Place Mamaroneck NY 10543  
(Principal office address)  
SAME AS MAILING  
(Current mailing address)
8. General Contractor  
(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 NOT acceptable)  
Name: Robin O'Connor  
Office Address: 4713 Webber St  
Sarasota, Florida 34232  
(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.*  
Robin O'Connor  
(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.

FILED  
14 MAR 19 AM 11:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## 12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_**B. OFFICERS**President: Vincent D Tyer IIIAddress: 539 Gilbert AvenuePearl River NY

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_Secretary: Gerald HolbrookAddress: 930 The Parkway Mamaroneck NY 10543Treasurer: James HanleyAddress: 536 Orienta Ave Mamaroneck NY 10543

NOTE: If necessary, you may attach an addendum to this application listing 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 a third degree felony as provided for in § 817.155, F.S.

14. Gerald Holbrook

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

FILED  
14 MAR 19 AM 11:44  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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 the certificate of incorporation of

TACONIC BUILDERS, INC.

a domestic STOCK corporation, was filed in this office on October 05, 1987, a certificate of dissolution  
has not been filed, the corporation has filed all annual reports, and so far as indicated by the records of  
this office such corporation is in existence.



Secretary of the State

Date Issued: March 18, 2014

FILED  
14 MAR 19 AM 11:44  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA