

TO: Registration Section Division of Corporations		1
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SUBJECT: WSE INC.	oration - must include suffix)	<del>- 44</del>
	. b. 000 - 1	1
Dear Sir or Madam: 00789	T-00071	
The enclosed "Application by Foreign Corporation" (Certificate of Existence", and check are submitted	on for Authorization to Transact	Business in Florida",
to transact business in Florida.	ed to register the above referenc	ced foreign corporation
Please return all correspondence concerning this i	matter to the following:	
Susan Oz (Na	VEY	
(Na	me of Person)	
WSE, INC		
(Fir.	m/Company)	
543 BRook	MAVEN DRIVE	
Deinalda G	HAVEN DRIVE (Address)  State and Zip code)	MOI-19280
(City/S	State and Zip code)	
	701	0 <b>0045361576</b> -08/15/0101044011
For further information concerning this matter, pl	ease call:	*****87.50 *****87.50
Sugar De Val	lane Ocal and	
(Name of Person) at (4)	Area Code & Davtime Telephor	ne Number)
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		ECR S
STREET ADDRESS:	MAILING ADDRESS:	SEP SEP AHAA
Registration Section	Registration Section	SSER 4 FILE
Division of Corporations 409 E. Gaines St.	Division of Corporation	SEE, F
Tallahassee, FL 32399	P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following amount:		2: 25 STATE LORIDA
□ \$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



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 20, 2001

SUSAN OLVEY WSE, INC. 543 BROOKHAVEN DRIVE ORLANDO, FL 32803

SUBJECT: WSE, INC.

Ref. Number: W01000019280

We have received your document for WSE, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6967.

Letter Number: 101A00047502

Michelle Hodges Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

## 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. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or 1. 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.) State or country under the law of which it is incorporated)

3. 59-3732824

(FEI number, if applicable) (Date of incorporation)

5. PERPETURE
(Duration: Year corp. will cease to exist or "perpetual") (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.) BROOKHAVEN DRIVE, ORLANDO, FL (Principal office address) (Current mailing address) MANUEACTURING & SALES

(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: R. VAN OLVEY

Office Address: 543 BROOKHAVEN DR.

ORLANDO, FL , Florida 33803 (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)

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. DIRECTOR	No.	% (
Chairman:	R. Van Divey	
Address:	543 BROOKHAVEN DR.	
	PRIANDO, FL 32803	1/1/25
Vice Chairman:		
Director:		
		<u>/ - /</u>
B. OFFICERS		
	2 1/201 1. 15.1	
Address: 5	43 BROOKMAVEN DR	<u> vila (22.8</u> ,8,8) (24.6)
Address.		
	RIANDO, FL 32803	
Vice President:		
Address:		
		<u> </u>
Treasurer:		,
Address:		
NOTE: If necessar	y, you may attach an addendum to the application listing additional officers and/or directors.	
13 / 1/1	1. d 10 -	
(Si	gnature of Chairman, Vide Chairman, or any officer listed in number 12 of the application)	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
14. <u>R + Va</u> ,	N Milder Dean	
	(Typed or printed name and capacity of person signing application)	<u> </u>

## State of Delaware Office of the Secretary of State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WSE, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINTH DAY OF AUGUST, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WSE, INC."
WAS INCORPORATED ON THE EIGHTEENTH DAY OF AUGUST, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

Warriet Smith Windson Harriet Smith Windson, Secretary of State

AUTHENTICATION: 1288775

3276452 8300

010390918

DATE: 08-09-01