Jensifer De Lakir Requester's Name	000/583
Address 20 Corporate Blvd City/State/Zip Phone #	DCiates, P.A. Lyster O 300005154033-1 -03/25/02-01068-007 *****70.00 *****70.00 Office Use Only MENT NUMBER(S), (if known):
1. (Corporation Name)	(Document #)
2(Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4(Corporation Name) Walk in Pick up time Mail out Will wait	(Document #) Certified Copy Photocopy Certificate of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger AMENDMENTS AMENDMENTS AMENDMENTS CRETARY SECRETARY OF STATE LED OF STATE OF
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other
CR2E031(7/97)	Examiner's Initials

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. HITE THREE TNC	
1. HITE THREE, INC. (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.)	
r and the first the second and the first the f	
2. <u>DELAWARE</u> 3. <u>22-3840257</u>	
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
(1 Li number, ii applicable)	
4. OCTOBER 25, 2001 5. Perpetual	
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	
6. <u>Upon Qualification</u>	
(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 D.O. Dov. 4	
7. P.O. Box 4, Toms River, NJ 08754	
(Principal office address)	
P.O. Box 4, Toms River, NJ 08754	
(Cymont mailing of days)	
(Current mailing address)	
ACE 02	
8. Real Estate MANAGEMENT	
8. Real Estate Management (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	
SA 2	<u> </u>
7. Name and street address of Florida registered agent: (PA) Box or Mail Drop Box NOT accomplished	FILED
acceptables of Man Drop Box 1401 acceptables	
Name: DAVID PRATT, ESQ.	
DAVID PRATT AND ASSOCIATES PA	
Office Address: 2101 Corporate Blvd., Ste. 220	
Boca Raton , Florida 33431	
(City) (Zip code)	
(== <u>p</u> =====	
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.	2
further agree to comply with the provisions of all statutes relative to the proper and complete performance of my	1
duties, and I am familiar with and accept the obligations of my position as registered agent.	
1 The state of the position as registered agent.	
α	
(April No. 14)	
(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. DIRECTO	DRS
Chairman:	
_	
	, and the second of the second
Address: _,	<u> </u>
Director:	
Address:	
	
B. OFFICER	${f s}$
President:	LILLIAN R. CITTA
	P.O. BOX 4
Vice President	TOMS RIVER, NJ 08754
	The second secon
Address:	
	
Secretary:	JOSEPH A. CITTA
Address:	P.O. BOX 4, TOMS RIVER, NJ 08754
Treasurer:	JOSEPH A. CITTA
Address:	P.O. BOX 4, TOMS RIVER, NJ 08754
NOTE: If neces	essary, you may attach an addendum to the application listing additional officers and/or directors.
13	A Illian R. Citta (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
,	
14	LILLIAN R. CITTA, PRESIDENT
	(Typed or printed name and capacity of person signing application)

Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HITE THREE, 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 EIGHTEENTH DAY OF MARCH, A.D. 2002.



Warriet Smith Windson, Secretary of State

AUTHENTICATION: 1672353

DATE: 03-18-02

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