## F030000002348

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:
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#### TRANSMITTAL LETTER

**TO:** Registration Section Division of Corporations

SUBJECT:	CORNERSTON	e Travel	. Acqui	SITIONS, IN
_		corporation - must i		
Dear Sir or Made	am:			
	pplication by Foreign Corpo xistence", and check are sub ess in Florida.			
Please return all	correspondence concerning  7. Beye	R	lowing:	
CORNE	estone TRA	(Name of Person)	NOTIZII	INC.
1300	FRONTAGE A	(Firm/Company)		
STILLW		(Address)	9	THE SCOOL
	(	City/State and Zip co	de)	i. F. F. O. S. T.
For further infor	mation concerning this matt	er, please call:		350
MILLIAM :	J. Beyer at	715 38	6-6222	_
(Name o	of Person)		aytime Telephone Nu	ımber)
STREET ADDR Registration Sect Division of Corp 409 E. Gaines St Tallahassee, FL	tion orations -	Registra Division P.O. Bo	NG ADDRESS: tion Section of Corporations x 6327 see, FL 32314	
Enclosed is a che	eck for the following amoun	t:		
\$70.00 Filing	Fee S78.75 Filing Fe Certificate of S		l 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.

	erstone		CQUISITIONS, INC	<b>∧</b> ,
Name of corpo	ration; must include th	e word "INCORPORATE	ED", "COMPANY", "CORPORATION" or	1
	-	in language as will clearly contained in the name at p	indicate that it is a corporation instead of a present.)	<u>ኇ</u> ፞
	VESOTA		Zz-3868099 F	24
	under the law of which	3.	(FEI number, if applicable)	
		in it is incorporated)	PERPETUAL 9	4/2
01//	0/02	5		00
	te of incorporation)	As .	(Duration: Year corp. will cease to exist or "perpetual")	Y
"UPOr		FICATION	The second secon	<u>ت</u> ب
Date first transa			transacted business in Florida, insert "upon qualification.")	
12.00	<u> </u>		,607.1502 and 817.155, F.S.)	
1300	FRONTA66	KOAD W.	- STILLWATER, MN 55082	
		(Principal office addre	ess)	
1300	FRONTAGE	ROAD W.	- STILLWATER, MN JJO82	
		(Current mailing addre		
~	<b>A</b>			
IRAV	el Abei	NCY		
(Purpose(	(s) of corporation author	orized in home state or cou	untry to be carried out in state of Florida)	
			MOD MUD B. NOW	
Name and str	reet address of Flor	ida registered agent: (	(P.O. Box or Mail Drop Box NOT acceptable)	
		ZEN		
Name and str	PAT HA	ZEN		
		ZEN	(P.O. Box or Mail Drop Box NOT acceptable)  TRAIL (SUITE 208)	
Name:	PAT HA 24600 S	. TAMIAMI	TAAL (SUITE ZOS)	
Name:	PAT HA	. TAMIAMI		

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. DIRE	_	. M.,					
Chairman:	Scott	W. No	RDWA	<u> </u>		<u></u> .	
Address: _	1300 F	rontage'	ROAL	5 W.			
_	1300 F STILLWA	TER, MN	7.7.7	82		6. T	3
Vice Chain	nan: WILLI	1H T.	BEYE	· A		110	3/
	1300 FR					The Co	3 X
_	STILLWAT	ER, MN	1708	22		355	(3) 14.
Director: _	Scott	W. N	ORDW	ALL		<u> </u>	1000
Address: _	1300 FR	ontage	ROAD	W·			10/5
	STILLWAT	ER, MN	2708	2			with the second
Director: _	WILL	AM J.	Beye	R			
Address: _	1300 FA	LONTAGE	ROAD	w.			
-	STILLWAT	ER, MN	120	280		· e.	
B. OFFI	CERS	,					
President:	Scott	W. No	RDWA	LL			
	1300 FAC		,				
_	STILLWATE					-	
Vice Presid	ent: WIL						
	1300 FAC					·	
_	STILLWAT	ER, MN	120	82			<u> </u>
Secretary:	Sco.	F'W. 1	NORDN	MLL			
Address: _	1200 En	NTA6E	ROAD	W	STILLWATER	MN	1208S
Treasurer:	WILL	LIAM T	· BE	YER			
Address: _	1300 FA	NTAGE	ROAD	w	STILLWATER	MM	72085
	•				•	•	
NOTE: I	necessary, you may	attach an addendun	n to the appli	cation listing	additional officers and/o	or directors.	
13	(Signature of	hairman Vice Cha	irman or any	officer liste	d in number 12 of the app	lication)	
<sub>14.</sub> \	VILLIAM	J. BE	YER	OTHER HALE		nivunon)	
	(Typed	or printed name an	nd capacity of	person sign	ing application)	· · · · · · · · · · · · · · · · · · ·	

### State of Minnesota

# SECRETARY OF STATE

Certificate of Good Standing

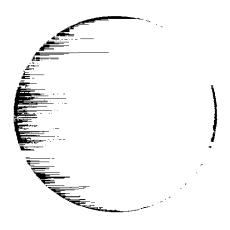
I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: Cornerstone Travel Acquisitions, Inc.

Date Formed: 09/10/2002

Chapter Governed By: 302A

This certificate has been issued on 04/23/03.



Mary Kiff