

F07000002795

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

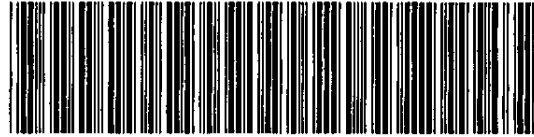
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

MAY 25 2007

1

Office Use Only



700101728757

05/29/07--01002--025 **87.50

2007 MAY 25 P 12:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

D. WHITE MAY 29 2007

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: UNIVAIR, 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," 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:

SHIRLEY FUCHS
(Name of Person)

UNIVAIR, INC.
(Firm/Company)

2773 ROCK CREEK DR
(Address)

PORT CHARLOTTE, FL 33948
(City/State and Zip code)

For further information concerning this matter, please call:

SHIRLEY FUCHS at (941) 764 1662
(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. UNIVAIR, INC. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DELAWARE (State or country under the law of which it is incorporated) 3. 43-1071581 (FEI number, if applicable)

4. 02-13-1976 (Date of incorporation) 5. PERPETUAL (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. 2773 ROCK CREEK DR, PORT CHARLOTTE, FL 33948 (Principal office address)

2773 ROCK CREEK DR, PORT CHARLOTTE, FL 33948 (Current mailing address)

8. BUSINESS CONSULTING (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: SHIRLEY FUCHS

Office Address: 2773 ROCK CREEK DR

PORT CHARLOTTE, Florida 33948 (City) (Zip code)

FILED 2007 MAY 25 P 12:45 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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.

Shirley Fuchs (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:

FILED

A. DIRECTORS

Chairman: _____ 2007 MAY 25 P 12:46

Address: _____ SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: _____

Address: _____

Director: SCOTT NIELSEN

Address: 2773 ROCK CREEK DR
PORT CHARLOTTE, FL 33948

Director: _____

Address: _____

B. OFFICERS

President: SHIRLEY FUCHS

Address: 2773 ROCK CREEK DR, PORT CHARLOTTE, FL 33948

Vice President: SHIRLEY FUCHS

Address: 2773 ROCK CREEK DR, PORT CHARLOTTE, FL 33948

Secretary: SHIRLEY FUCHS

Address: 2773 ROCK CREEK DR, PORT CHARLOTTE, FL 33948

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Scott Nielsen
(Signature of Director or Officer listed in number 12 of the application)

14. SCOTT NIELSEN - DIRECTOR
(Typed or printed name and capacity of person signing application)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "UNIVAIR, 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 SEVENTH DAY OF MARCH, A.D. 2007.

FILED
2007 MAY 25 P 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

0821260 8300

070283489



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5485255

DATE: 03-07-07