

ACCOUNT NO.

072100000032

REFERENCE

1.60950

4341705

AUTHORIZATION

COST LIMIT

ORDER DATE: November 19, 1996

ORDER TIME : 10:16 AM

ORDER NO. : 160950-005

600002020776--1

CUSTOMER NO:

4341705

CUSTOMER: Ms. Linda Fried Warren & Sklar 1033 Gayley Avenue

Suite 208

Los Angeles, CA 90024

### FOREIGN FILINGS

NAME:

POLAR AIR CARGO, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Victoria L. Perez

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO

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	POLAR AIR CARGO,	INC.						
	(Name of corporation: must abbreviations of like import or partnership if not so cont	Include the word "INC in language as will cle tained in the name at p	CORPORATED arly indicate to present.	", "COMPA hat it is a co	NY", "COR prporation (	PORATION Instead of	y" or wo a nutura	ords or il perso
2	California		3	33-0	420245		덮	
_	(State or country under the	law of which it is inco	rporated)	(FEI numbe	r, if applica	ble) O'	50	<del></del>
4	. 3/9/94 (Date of Incorporation)	5	Perpe					
	(Date of Incorporation)		(Duration: Y	ear corp. w	ill cease to	exist br "	perperu	a(")
6	Upon Qualificati	on				304	ESE B	
_	(Date first transacted busine	ess in Florida. <i>(See Jac</i>	tions 607.15	01, 607.15	02, and 81	7.155 <u>-</u> F.S		
_	100 0000000 1	Eat Diam			0			
/	100 Oceangate, 1	Jen Floor	·			æ	묽	
	Long Beach, Cali	fornia 90802						
	(	Current mailing addres	a)					
8.		<del>-</del>	,			,		
	International Ca							
	(Purpose(s) of corporation	authorized in home at	ate or country	to be carri	ed out in the	state of	Florida)	-
_	Names and severe substitute							
9,	. Name and street add	iress of Fiorida re	gistered a	jent:				
	Name:_	Corporation Ser	vice Compa	ny		•		
	Office Address:	1201 Hays Stree	t	•			٠	
				<del></del>				
	_	Tallahassee			Florida,	32301		
	_				. , /	(Zip C	ode)	
			•		•			
	^ D!	_						. ,

#### 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.

By:

(Registered agent's signaruse)

A. P. Polizzi, Assistant Vice President

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 addresses of officers and/or directors:

	Chairman:	Edwin II. Wnllaco	
	Address:	100 Oceangate, 15th Floor	
		Lone Beach, California 90802	
	Vice Chair	man:	. '
	Address:		<b>_</b>
	Director:	Mark S. Wost	-
	Address:	100 Oceangate, 15th Floor Long Beach, California 90802	95 DEC
	Director:	nong penenty datated inter-	_ <u>^</u>
	Address:		
		· · · · · · · · · · · · · · · · · · ·	-
OFFIC	- -	Chief Executive Officer: Edwin H. Wallace 100 Oceangate, I Mark S. West Long Beach, Cali	_ & & & & & & & & & & & & & & & & & & &
OFFIC	President: Address:	100 Oceangate, 1	_ & & & & & & & & & & & & & & & & & & &
OFFIC	President: Address:	Mark S. West  100 Oceangate, I Long Beach, Cali  100 Oceangate, 15th Floor  Long Beach, California 90802	_ & & & & & & & & & & & & & & & & & & &
OFFIC	President: Address:	Mark S. West  100 Oceangate, I Long Beach, Cali  100 Oceangate, 15th Floor  Long Beach, California 90802	_ & & & & & & & & & & & & & & & & & & &
OFFIC	President: Address: Vice Presid Address:	Mark S. West  100 Oceangate, I Long Beach, Cali  100 Oceangate, 15th Floor  Long Beach, California 90802	_ & & & & & & & & & & & & & & & & & & &
OFFIC	President: Address: Vice Presid Address: Secretary:	Mark S. West Long Beach, Cali  100 Oceangate, 15th Floor  Long Beach, California 90802  ent:	_ & & & & & & & & & & & & & & & & & & &
OFFIC	President: Address: Vice Presid Address: Secretary:	Mark S. West Long Beach, Cali  100 Oceangate, 15th Floor Long Beach, California 90802  ent:  Jill L. Muckenthaler  100 Oceangate, 15th Floor	_ & & & & & & & & & & & & & & & & & & &
OFFIC	President: Address: Vice Presid Address: Secretary: Address:	Mark S. West Long Beach, Cali  100 Oceangate, 15th Floor Long Beach, California 90802  ent:  Jill L. Muckenthaler  100 Oceangate, 15th Floor Long Beach, California 90802	_ & & & & & & & & & & & & & & & & & & &

ice Chairman, or any officer listed in number 12 of the application.)

Mark S. West, President
(Typed or printed name and capacity of person signing application)



## SECRETARY OF STATE

# CERTIFICATE OF STATUS DOMESTIC CORPGRATION

I, BILL JONES, Secretary of State of the State of California, hereby certify:

That on the 22nd day of June 19 99:

became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

December 4, 1996.

Billyones

Secretary of State