F99000001807

To: Qualification/Tax Lien Section Division of Corporations		
SUBJECT: AGV SONTS (Name of corporation	n - must include suffix)	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for A "Certificate of Existence", and check are submitted to retransact business in Florida.		
Please return all correspondence concerning this matter	to the following: 100002829561	
Michael Farro	-04705/9901127003 *****70.00 ******70.00	
AGV Sports Gr (Firm/Cor	oup, luc	
3200 Poderich	K Rood ₽ss se	
Frederick, MI) 21704 - RR R R T	
Should you need to call someone concerning this matter		
(Name of Person) (Area Code & Daytime Telephone Number)		
STREET ADDRESS:	MAILING ADDRESS:	
Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St.	Qualification/Tax Lien Section Division of Corporations P.O. Box 6327	
Tallahassee, FL 32399	Tallahassee, FL 32314 —	
Enclosed is a check for the following amount:	<u></u> 골	
\$70.00 Filing Fee \$\Boxed{\sigma}\$ \$78.75 Filing Fee & \$\Boxed{\sigma}\$ Certificate of Status	\$78.75 Filing Fee & Sertified Copy Sertified Copy Certified Copy 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.
(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.)
2. (State or country under the law of which it is incorporated) 4. (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") 6. (State or country under the law of which it is incorporated) (Duration: Year corp. will cease to exist or "perpetual")
(Current mailing address) Develope Morthwood Distribution of New Meson, May 1871.
(Purpose(s) of corporation authorized in home state of 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: 27 25 25 25 25 25 25 25 25 25 25 25 25 25
Office Address: 507 Palm Ave. Titusville, FL., Florida, 32796
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 addresses of officers and/or directors: (Street address ONLY - P.O.	Box NOT acceptable)
A. DIRECTORS (Street address only - P.O. Box NOT acceptable)	<u>-</u>
Chairman: Richard Michael to mothe	· ·
Address: 3220 Roderck Road	
Frederick, Maryland Or	704 -
Vice Chairman:	
Address:	-
Director:	-
Address:	- TASE 99
	APR TO
Director:	SSE
Address:	
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	<u> </u>
President: Richard Michael Parmile	· · · · · · · · · · · · · · · · · · ·
Address: 320 Roderick Road	
Frederick Maruland	CIACIO
	2109
Vice President:	-
Address:	-
Secretary:	<u>-</u>
Address:	
Treasurer:	_
Address:	
	A
NOTE: Yo	<u> </u>
NOTE: If necessary, you may attach an addendum to the application listing addition	al officers and/or directors.
(Signature of Chairman, Vice Chairman, or any officer listed in num	her 12 of the amiliant
Dum of Michael Dracelle De	OCI 12 of the application)
(Typed or printed name and capacity of person sign	ning application)

STATE OF MARYLAND

708172

STATE DEPARTMENT OF ASSESSMENTS AND TAXATION

301 West Preston Street Baltimore, Maryland 21201

I, BETTY CHASE

OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT SAID DEPARTMENT, BY THE LAWS OF SAID STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATE CHARTERS, OR OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE; AND I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

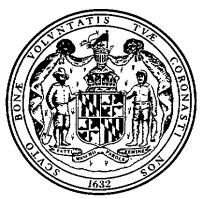
I FURTHER CERTIFY THAT AGV SPORTS GROUP, INC.

IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND SAID CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS—IN THE STATE OF MARYLAND.

PILED

99 APR -6 AM II: 06

SECRETARY OF STATE
TALLAHASSEF, FIORINA



IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE THIS 24TH DAY OF FEBRUARY, 1999.

CHARTER DIVISION

AT5-031