

*Sunstate*  
 Registrar's Name

**Q9900000090**

Address

City/State/Zip Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. Cold North Limited  
 (Corporation Name) (Document #)
2. \_\_\_\_\_  
 (Corporation Name) (Document #)
3. \_\_\_\_\_ **Q**  
 (Corporation Name) (Document #)
4. \_\_\_\_\_  
 (Corporation Name) (Document #)

FILED STATE  
 DEPARTMENT OF CORPORATIONS  
 DIVISION OF CORPORATIONS  
 199 OCT 19 AM 10:19

- Walk in     
  Pick up time \_\_\_\_\_     
  Certified Copy  
 Mail out     
  Will wait     
  Photocopy     
  Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

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 \*\*\*\*\*35.00 \*\*\*\*\*35.00

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input checked="" type="checkbox"/>	Other <u>Allen Business</u>

*B/K*

*10/19/99*

DEPARTMENT OF STATE  
 DIVISION OF CORPORATIONS  
 TALLAHASSEE, FLORIDA

99 OCT 19 AM 9:18

RECEIVED

Examiner's Initials

**DESIGNATION OF REGISTERED AGENT AND REGISTERED OFFICE FOR  
ALIEN BUSINESS ORGANIZATION**

PURSUANT TO SECTION 607.0505, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO DESIGNATE ITS REGISTERED AGENT AND REGISTERED OFFICE IN THE STATE OF FLORIDA:

99 OCT 19 AM 10:19  
STATE OF FLORIDA  
DEPARTMENT OF CORPORATIONS

1. Cold North Limited  
(Name of alien business organization)
2. British Virgin Islands  
(State or country under which entity is organized)
3. c/o Jean-Charles Dibbs, Esq., Shutts & Bowen  
201 S. Biscayne Boulevard, 16th Floor, Miami, Florida 33131  
(Principal office address)
4. N/A  
(Federal Employer Identification number, if applicable)
5. Name and Florida street address of registered agent.  
Corporation Company of Miami, 201 S. Biscayne Boulevard, 16th Floor,  
Miami, FL 33131
6. The street address of the registered office and the street address of the business office of the registered agent are identical.
7.  [Signature]  
(Signature of chairman, vice chairman, or officer)
8. Jorge Riveras de la Pena, President  
(Name and capacity of person signing in number 7 above)
9. Signature of registered agent:  
-I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505, Florida Statutes.  
Corporacion Company of Miami  
By: [Signature]  
(Registered agent accepting appointment)  
ASSISTANT SECRETARY

4/30/99

(Date)

THE FILING OF THIS ALIEN BUSINESS ORGANIZATION FORM WITH THE FLORIDA DEPARTMENT OF STATE DOES NOT AUTHORIZE THE ABOVE REFERENCED ENTITY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.