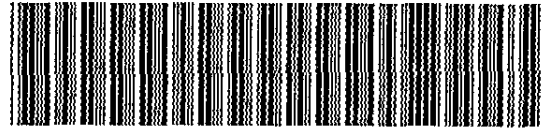


BO3000000297

03 AUG 17 AM 9:04

STATE
FLORIDA



200020774002

07/07/03--01048--006 **87.50

(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:

W03-19964

AL

Office Use Only



FILED
03 AUG 17 AM 9:04
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

RE: Registration of a Foreign Limited Partnership

July 1, 2003

Dear Sir or Madam:

Enclosed please find our application for Authorization to Transact Business in Florida, the Affidavit of Capital Contributions for a Foreign Limited Partnership and a check in the amount of \$87.50.

CARTOON CUTS, LP is a chain of children's hair salons. No capital is being contributed to open our store in Florida; all expenses will come from cash flow.

The check includes the minimum registration fee of \$52.50 plus the \$35.00 fee to designate a Registered Agent.

If you have any questions, please contact me, Jo Mozingo. My telephone number is 703-354-3801 X203. My email address is: jmozingo@cartooncuts.biz.

Please forward an acknowledgement of our status to me at:
5501 Backlick Road, Suite #118
Springfield, Virginia 22151

Sincerely,

Jo Mozingo
Accounting



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

FILED

03 AUG 17 AM 9:04

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

July 15, 2003

CARTOON CUTS
ATTN: JO MOZINGO
5501 BACKLICK ROAD, SUITE 118
SPRINGFIELD, VA 22151

SUBJECT: CARTOON CUTS, LP
Ref. Number: W03000019964

We have received your document for CARTOON CUTS, LP and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability partnership must have an active registration/filing on file with this office before this filing will be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 803A00041567



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

FILED
03 AUG 17 AM 9:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 11, 2003

CARTOON CUTS
ATTN: JO MOZINGO
5501 BACKLICK ROAD, SUITE 118
SPRINGFIELD, VA 22151

SUBJECT: CARTOON CUTS, LP
Ref. Number: W03000019964

We have received your document for CARTOON CUTS, LP and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability partnership must have an active registration/filing on file with this office before this filing will be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 003A00045771



FILED
03 AUG 17 AM 9:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Florida Department of State
Registration Section
Division of Corporations
Attn: Agnes Lunt
409 E Gaines Street
Tallahassee, Florida 32314

RE: Registration of a Foreign Corporation

August 21, 2003

Dear Ms Lunt:

Enclosed please find our application for CASHEW HOLDINGS' Authorization to Transact Business in Florida and a check in the amount of \$87.50.

The check includes the minimum registration fee of \$52.50 plus the \$35.00 fee to designate a Registered Agent.

Also enclosed is the original Registered Agent signature page for CARTOON CUTS' Application by Foreign Limited Partnerships for Authorization to Transact Business in Florida, and your letter requesting these documents.

If you have any questions, please contact me, Jo Mozingo. My telephone number is 703-354-3801 X203. My email address is: jmozingo@cartooncuts.biz.

Please forward an acknowledgement of our status to me at:
5501 Backlick Road, Suite #118
Springfield, Virginia 22151

Thank you for your assistance and prompt attention to this matter.

Sincerely,

Jo Mozingo
Accounting

APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

03 AUG 17 AM 9:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. CARTOON CUTS, LP

(Name of limited partnership as it is in the home state)

2. _____
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida;
must contain the word "LIMITED" or "LTD.")

3. DELAWARE

(State of Formation)

4. 10/12/1990

(Date of Formation)

5. CT CORPORATION SYSTEM

(Name of Registered Agent for Service of Process)

6. 1200 SOUTH PINE ISLAND ROAD

(Street Address of Registered Office)

PLANTATION

(City)

Florida 33324

(Zip Code)

7. Acceptance by the Registered Agent for Service of Process:

CT CORPORATION SYSTEM

[Signature]

(Agent must sign on this line)

ANUSHA PUTY, VP + ASST. SEC.

CORP TRUST CO

8. CORPORATE TRUST CENTER

1209 ORANGE ST

WILMINGTON, DE 19801

(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS

STREET ADDRESS

CASHEW HOLDINGS, INC 5501 Backlick Road, Ste#118; Springfield, VA 22151

10. 5501 Backlick Road, Ste#118; Springfield, VA 22151

(Office where Names, Addresses and Contributions of Limited Partners are kept.)

11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.

CONTINUED

12. 5501 Backlick Road, Ste#118; Springfield, VA 22151

FILED

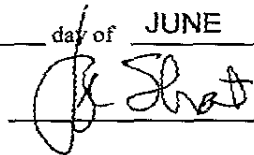
03 AUG 17 AM 9:05

(Mailing Address of Limited Partnership)

STATE
TALLAHASSEE, FLORIDA

Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 30th day of JUNE, 2003



General Partner

STATE OF VIRGINIA

COUNTY OF FAIRFAX

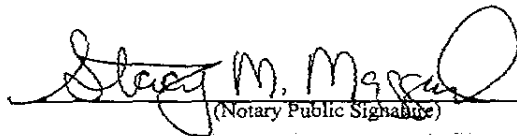
On this 30th day of JUNE, 2003

JORGE SALVAT

, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of



(Notary Public Signature)

STACY M. MAGGARD

(Notary's Printed Name)

STACY M. MAGGARD
NOTARY PUBLIC FAIRFAX, VA
MY COMMISSION EXPIRES DEC 31 2004
ACTING IN FAIRFAX COUNTY, VA

Seal

My Commission Expires:

12/31/04

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

FILED

03 AUG 17 AM 9:05

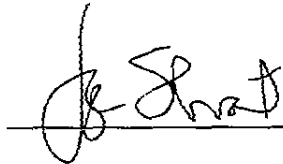
BEFORE ME the undersigned personally appeared JORGE SALVAT
a general partner of CASHEW HOLDINGS, INC, a (an) _____
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The amount of capital contributions of the limited partners is \$ 0
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 0

Under the penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 30th day of JUNE, 2003



General Partner

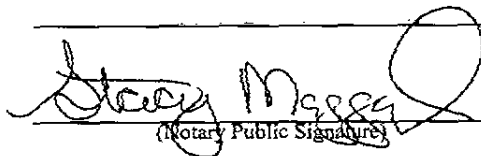
STATE OF VIRGINIA

COUNTY OF FAIRFAX

On this 30th day of JUNE, 2003

JORGE SALVAT, personally appeared before me,

- ☒ who is personally known to me
☐ whose identity I proved on the basis of _____


(Notary Public Signature)

STACY MAGGARD

(Notary's Printed Name)

STACY M. MAGGARD
NOTARY PUBLIC FAIRFAX, VA
MY COMMISSION EXPIRES DEC 31 2004
ACTING IN FAIRFAX COUNTY, VA

Seal

My Commission Expires: 12/31/04