F000MMM (153

Qualification/Tax Lien Section Division of Corporation's Tampa Bay Properties, Inc. SUBJECT: (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. 200003083352 -01/05/00--01077--007 Please return all correspondence concerning this matter to the following: *****78.75 *****78.75 Mark Arth (Name of Person) <u>3302 Wallace Ave.</u> (Firm/Company) 3302 Wallace Avenue (Address) Tampa, FL 33611 (City/State/Zip) Should you need to call someone concerning this matter, please call: Name Availábil Mark Arth (Area Code & Daytime Telephone Number (Name of Person) STREET ADDRESS: 3302 Wallace Ave MAILING ADDRESS: Outlitten on Tak Lien Section Qualification/Tax Lie Sameion Division of Corporations Division of Corporations P.O. Box 6327 409 E. Gaines St. Tallahassee, FL 32314 Tallahassee, FL 32399 Enclosed is a check for the following amount:

☐ \$78.75 Filing Fee &

Certified Copy

☐ \$78.75 Filing Fee &

Certificate of Status

☐ \$70.00 Filing Fee

□ \$87.50 Filing Fee,

Certified Copy

Certificate of Status &

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.

Tamp	pa Bay Properties, Inc.	_
words or abbre	oration; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or viations of like import in language as will clearly indicate that it is a corporation instead of a or partnership if not so contained in the name at present.)	
Nevada	3. 11- a010-135	,
(State or country	y under the law of which it is incorporated) (FEI number, if applicable)	
4. <u>Dec</u>	ember 7, 1999 5. Perpetual	
	te of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	
6. 3 <u>J</u>	AN 2000	
(Date firs	t transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	
7		
·· P.O.	Box 28909, Las Vēgas, NV 89126	
	(Current mailing address)	-কেট
8. <u> </u>	Renovate > Resell Single Foundy Itauses (s) of corporation authorized in home state or country to be carried out in state of Florida)	
(Purpose		
9. Name and st	reet address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	
	* , t · ' =	
Name: M	ark Arth	
Office Address:	3302 Wallace Ave	
	Tampa , Florida, 33611	
	, Florida,, Zip code)	····
10 Desigtered	agent's acceptance:	
10. Registered	agent's acceptance.	
this application, I with the provision	ted as registered agent and to accept service of process for the above stated corporation at the place designated in hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply as of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept my position as registered agent. (Registered agent's signature)	
•	(Registered agent's signature)	

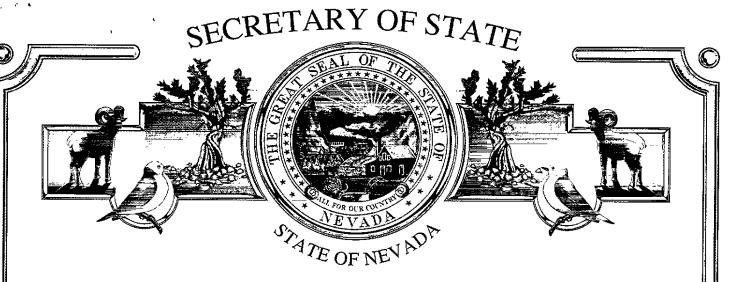
12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

which it is incorporated.

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

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)			
.Chairman:	 		
Address:		-	<u>.</u>
	······································		_:=:
Vice Chairman:	, Ab		L 44 - 1 - 1
Address:		cos <u>se obre c</u>	
	The state of the s		uget je i ti
Director: A. SyED-ARth			
Address: 3302 WALLACE AUE			
TAMPA, FL 33611			
Director:			
Address:			
			*
B. OFFICERS (Street address only - P.O. Box NOT acceptable)			<u>.</u> e
President.			
Address:		<u> </u>	-
		2 3 0	
Vice President:		<u> </u>	, - · · ·
Address:		~ <u>-</u>	.
		<u> </u>	o i e e e
Secretary:	<u> </u>		
Address:			्र इ.च्य
			والواسية مواد
Treasurer:			· - = -
Address:		<u> </u>	
NOTE: Nessessary you may attach an addendum to the application listing additions	al officers and/or directors.		
13 A XxedAta Resident	· .		. - .
(Signature of Chairman, Vice Chairman, or any officer listed in number 14.	ber 12 of the application)		
14. (Typed or printed name and capacity of person sign	ning application)		=

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CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, and limited-liability partnerships pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **TAMPA BAY PROPERTIES**, **INC.** as a Corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 7, 1999, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Las Vegas, Nevada, on **December 7**, 1999.

Son Heller

Secretary of State

Lance

Certification Clerk

