

_	ation Section	
	n of Corporations Florida International Associates, Inc.	
SUBJECT:	(Name of corporation - must include suffix)	
Dear Sir or Mad		
The enclosed "A "Certificate of E transact business	Application by Foreign Corporation for Authorization to Transact Business in Flori Existence, and check are submitted to register the above referenced foreign corporates in Florida.	ida", ation to
Please return all	correspondence concerning this matter to the following:	
	Timothy M. Paletti president	
,	(Name of Person)	
	Florida International Associates, Inc.	
•	(Firm/Company)	
	430 NE 15 Ave. Suite D	
	(Address)	
	High Springs, Florida 32643	
	(City/State/Zip)	
	90003126 -02/07/00—0 to call someone concerning this matter, please call: ******70.00	01134-
Should you need		
Timothy 1	M. Paletti at (904) 496-224405 454-35 (Area Code & Daytime Telephone Number)	73
Timothy 1		1
Timothy (Name of	of Person)  (Area Code & Daytime Telephone Number)  RESS:  MAILING ADDRESS:  ATTEMNT ADDRESS:	200 FEB -7
(Name of STREET ADDING) Registration Sect	of Person)  (Area Code & Daytime Telephone Number)  RESS:  MAILING ADDRESS:  Registration Section	00 FEB -7
(Name of STREET ADDING STREET ADDING SECTION OF Corp. 409 E. Gaines St.	Area Code & Daytime Telephone Number)  RESS:  MAILING ADDRESS:  Registration Section  Porations  Division of Corporations  P.O. Box 6327	00 FEB -7
(Name of STREET ADDER	Area Code & Daytime Telephone Number)  RESS:  MAILING ADDRESS:  Registration Section  Porations  Division of Corporations  P.O. Box 6327	00 FEB -7
(Name of Name	Area Code & Daytime Telephone Number)  RESS:  MAILING ADDRESS:  Registration Section  Porations  Division of Corporations  P.O. Box 6327	00 FEB -7

## 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.
. Florida International Associates, Inc.
(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. Wyoming 3. YQ 59-2955 446  (State or country under the law of which it is incorporated)  4. 1995 Wyoming 5. Derpetual  (Date of incorporation)  (Duration: Year corp. will cease to exist or "perpetual")
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 1995 Wyoming 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon qualification (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. a. 430 NE 12! Ave. High Springs, Florida 32643 (Principal office address) b. Rt 2 Box 730 Lake Butler, Florida 32054
(Principal office address)
(Current mailing address)
8. any and all legal business
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida
9. Name and street address of Florida registered agent: (F.O. Box of Mail Drop Box 1401 acceptable)
Name: Timothy M. Paletti
Name: Timothy M. Paletti  Office Address: 430 NE 15 Ave.  High Springs, Florida, Florida 32643
High Springs, Florida, Florida 32643
(Zip code)
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 business addresses of officers and/or directors:
A. DIRECTORS
Chairman: Timothy M. Paletti.
Address: 430 NE 15t Ave.
Address: 430 NE 1st Ave.  High Springs, Florida 32643
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: Timothy M. Paletti For 8
Address: 430 NE 1st Ave.
High Springs Horida 32648
High Springs Horida 32645
Vice President:
Address:
Secretary: Tara Woolley
Address: 430 NE 15 Are
High Springs, Florida 32642
Treasurer: Timothy M. Paletti
Address: 430 NE 151 Ave.
High Springs, Florida 32643
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
1. ille M Palatti Oliman
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. Timothy M. Paletti, Chairman
(Typed or printed name and capacity of person signing application)

## State of Wyoming

Office of the Secretary of State



United States of America. State of Wyoming

I, JOSEPH B. MEYER, Secretary of State of the State of Wyoming, do hereby certify that according to the records in the office of the Secretary of State of Wyoming, FLORIDA INTERNATIONAL ASSOCIATES, INC. is a corporation organized under the laws of the State of Wyoming, whose date of incorporation is 07/20/1995; and whose period of duration is perpetual.

I FURTHER CERTIFY that this corporation has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and that Articles of Dissolution have not been filed, thus making the corporation in existence in the State of Wyoming.

> IN TESTIMONY WHEREOF, I have hereunto set my hand affixed the Great Seal of the State of Wyoming. Done at Cheyenne, the Capital

21st day of December A.D., 1999.

