To: Registration Sec Division of Cor			
SUBJECT:	Pure Prode	ENGRAPES, IN	Λ(
(Name of corporation - must include suffix)			
Dear Sir or Madam:			
	e", and check are submitted	for Authorization to Transact to register the above reference	
Please return all corresp	ondence concerning this m	atter to the following:	
A so all K O sall			
Hugust Kidwell (Name of Person)			
Pure Prile Enterprises, Inc. (Firm/Company)			
(Firm/Company)			
75 B. V. D. D			
75 Buck Road			
(Address)			
(Address) Hunting lan Valley PA 19006 (City/State/Zip) 500003135325—8.			
(City/State/Zip) 5000031353258			
			-02/15/8001044002 *****70.00 *****70.00
Should you need to call someone concerning this matter, please call:			
(Name of Person) at (215) GAL 4620 (Area Code & Daytime Telephone Number)			
STREET ADDRESS:		MAILING ADDRESS:	
Registration Section		Registration Section	ALL DO TO
Division of Corporations	S	Division of Corporations	8
409 E. Gaines St.	,	P.O. Box 6327	7
Tallahassee, FL 32399		Tallahassee, FL 32314	5/2
Enclosed is a check for t	he following amount:		
\$70.00 Filing Fee	S78.75 Filing Fee &	□ \$78.75 Filing Fee & Certified Copy	3 \$87.50 Filing Fee,

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.) | New Country (Van 19 | 3. | 23 29 22 5 75 |
| (State or country under the law of which it is incorporated) | (FEI number, if applicable) |
| 9 7 9 7 | 5. | | Despetual |
| (Date of incorporation) | (Duration: Year corp. will cease to exist or "perpetual") (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.) Ruch Cool Huntingon Vally PA 19005
(Principal office address) Current mailing address 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Office Address: 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

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.

(Registered agent's signature)

and accept the obligations of my position as registered agent.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Augustine Vice Chairman: Secution Address: Director: Address: **B. OFFICERS** President: Address: Vice President: Address: Secretary: Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

(Typed or printed name and capacity of person signing application)

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

DECEMBER 29, 1999

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

PURE PRIDE ENTERPRISES INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

JSOW