

Document Number On

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C T CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 (850)222-1092

City

State

Zip

Phone

000003166670--4

-03/13/00--01065--003

*****70.00 *****70.00

CORPORATION(S) NAME

New Tampa, Inc.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 MAR 15 PM 3:30

Profit

NonProfit

Limited Liability Company

Foreign

Amendment

Dissolution/Withdrawal

Merger

Mark

Limited Partnership

Reinstatement

Limited Liability Partnership

Certified Copy

Annual Report

Reservation

Photo Copies

Other

Change of R.A.

Fictitious Name

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CONNIE BRYAN

BYC
3/13/00

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00 MAR 13 AM 10:4
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

March 13, 2000

C T CORPORATION SYSTEM

TALLAHASSEE, FL

SUBJECT: NEW TAMPA, INC.
Ref. Number: W00000006684

dlb/la
New Tampa, Inc. of Pennsy
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
MAR 15 PM 3:30

We have received your document for NEW TAMPA, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$70.00 payment.,

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

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) 487-6914.

Buck Kohr
Corporate Specialist

Letter Number: 100A0001388

3/15

File 1st

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RECEIVED
00 MAR 15 PM 12:16

RESOLUTION OF BOARD OF DIRECTORS (Please print or type)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 MAR 15 PM 3:30

I, the undersigned S. Michael Cohen, do hereby certify
(Name)

that this Resolution of the Board of Directors of New Tampa, Inc.

(Corporate Name)

a corporation duly organized and existing under the laws of the State of Pennsylvania
was duly adopted on March 2, 2000

Be it resolved, that New Tampa, Inc.
(Corporate Name)

organized and existing in the State of Pennsylvania, hereby adopts the name
New Tampa, Inc. of Pennsylvania for use in Florida.

Dated: March 15, 2000

S. Michael Cohen
Signature of either Chairman, Vice Chairman or any officer

S. Michael Cohen, Sole Director
Type or print Name

DNHS19(1/00)

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS MAR 15 PM 3:30

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.

- 1. New Tampa, 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. Pennsylvania (State or country under the law of which it is incorporated)
3. 23-3032335 (FEI number, if applicable)
4. March 2, 2000 (Date of incorporation)
5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 301 City Line Avenue, Suite 140, P.O. Box 2333, Bala Cynwyd, PA 19004 (Current mailing address)

8. Operation, Management and Disposition of Real Estate (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: (P.O. Box or Mail Drop Box NOT acceptable)
Name: C T Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida, 33324 (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.

CT Corporation System
(Registered agent's signature)
VICTOR A. DUVA
Assistant Vice President

11. Attached is a certificate of existence duly authenticated by the Secretary of State for the 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 addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)
FL019 - 9/2/99 C T System Online

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 APR 15 PM 3:30

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: S. Michael Cohen, Sole Director

Address: 301 City Line Avenue, Suite 140, P.O. Box 2333, Bala Cynwyd, PA 19004

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: S. Michael Cohen

Address: 301 City Line Avenue, Suite 140, P.O. Box 2333, Bala Cynwyd, PA 19004

Vice President: _____

Address: _____


Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. S. Michael Cohen, Sole Director and President
(Typed or printed name and capacity of person signing application)

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

MARCH 09, 2000

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 MAR 15 PM 3:30

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

NEW TAMPA, 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.

Kim Ditzinger

Secretary of the Commonwealth

DPOS