

To: Qualification/Tax Lien Section Division of Corporations		
SUBJECT: CDS/NEDCO, Iv (Name of corporation)	\c.	
(Name of corporation	on - must include suffix)	
Dear Sir or Madam:		÷
The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to to transact business in Florida.		
Please return all correspondence concerning this matter	er to the following:	000031778072 -03/21/0001080003
Brad Dinke	.\	*****70.00 *****70.00
(Name o	f Person)	<u> </u>
CBCINEDCO	Ivc.	
(Firm/Co	ompany)	
95 N 100 1		
	lress)	
Newhi ut	84148	
Nephi ut (City/St	ate/Zip)	
Should you need to call someone concerning this matt	er, please call:	
Plice Ricks at (435 (Name of Person) (Area	, 623-290	8
(Name of Person) (Area	Code & Daytime Telepho	one Number)
STREET ADDRESS:	MAILING ADDRESS	FIL DO MAR 21 SECRETAR ALLAHASS
Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	Qualification/Tax Lien Division of Corporatio P.O. Box 6327 Tallahassee, FL 32314	F STA
Enclosed is a check for the following amount:		
\$70.00 Filing Fee \$\square\$ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certificate of Status & 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.

1. CDS/NEBCO EKE.	
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or	<u>-</u>
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.)	
natural person of partitioning if not so contained in the nature as protection,	
2. Colorado 3. 84-1111846	
2. Colorale 3. 84-1111846 (State or country under the law of which it is incorporated) (FEI number, if applicable)	
(State or country under the law of which it is incorporated) (FEI flumber, if applicable)	
1989	
4. 1989 (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	all in one state in
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	
M I Tax	
6. May 1, 200B	ha has has
6. May 1, 2000 (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	
use Ol C D'a Cit	
7. 498 Palm Springs Drive Suite 100	
7. 498 Palm Springs Drive Suite 100 Altamonte Springs FL 32701 (Current mailing address)	
HILamonie Springs TL 30/01	•
(Current mailing address)	
• • •	
& Electronic components distribution	
8. Electronic components distributor (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	
	1.00min.com
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	
Name: Brent Robinson	
Office Address: 498 Pala Springs Dr Suite 100 AITa monte Springs, Florida, 32701 (Zip code)	<u> </u>
108 Pala Souries Die Suite 100 Six -	F
Office Address: 478	П - "=
Office Address: 498 Palm Springs Dr Jule 100 AITa monte Springs, Florida, 32701	
HILA MONIE Springs, Florida, 30/01	
$/ \qquad (Zip code) \qquad \stackrel{\cong}{\cong} \qquad \stackrel{\sim}{\sim} \qquad $	
Σ_{μ} . Since Σ_{μ}	
10. Registered agent's acceptance:	
10. Registered agent 3 acceptances	
Construction and the place design	matad in
Having been named as registered agent and to accept service of process for the above stated corporation at the place design	nuteu in
this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to co	mpiy 1
with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an	<i>ассер</i> і
the obligations of my position as registered agent.	
15D1 1)h	
1 January 1	
(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 addresses of officers and/or directors: (Street address ONLY P.O. Box NOT acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)		
Chairman:		-
Address:	<u> </u>	٠,
Vice Chairman:		
Address:		
	The state of the s	- –,
Director:	Access 2	
Address:		
	district the second	4
Director:	1.2 (A.1.2) PAGE 7	<u>#</u>
Address:		
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	70.00	
President: Bral Diwkel	- EG 3 11	
Address: 3725 NOID Hwg 91	2	
Nephi, UT 84648		
Vice President: Kathy Dinkel	FEST IS	
\sim	ORDE B	,-
Nephi, UT 84648	· · · · · · · · · · · · · · · · · · ·	٦
Secretary: Brad Dinkel		:
Address: 3725 N 010 Hwg 9/		-
Nephi, UT 84648		_
Treasurer: Kathy Dinkel	1 - 4 17	2
Address: 3725 N Old Hwy 91		
Nephi, UT 84648	<u> </u>	-
	Same and Jone directors	
NOTE: If necessary, you may attach an addendum to the application listing additional of	ncers and/or directors.	
13. (Signature of Chairman, Vice Chairman, or any officer listed in number 1	12 of the application)	4
Brad Dinkel President		
(Typed or printed name and capacity of person signing		



DEPARTMENT OF STATE

CERTIFICATE .

I, DONETTA DAVIDSON, SECRETARY OF STATE OF THE STATE OF COLORADO HEREBY CERTIFY THAT ACCORDING TO THE RECORDS OF THIS OFFICE,

CDS/NEDCO, INC. (COLORADO CORPORATION)

BECAME INCORPORATED UPON FILING ARTICLES OF INCORPORATION DATED February 21, 1989.

DATED: February 17, 2000

SECRETARY OF STATE