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To: Qualification/Tax Lien Section Division of Corporations		
SUBJECT: ABC PLASTIC	3, Ive. The second of the second second	
SUBJECT: ABC PLASTICS, /NC.  (Name of corporation - 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.	r Authorization to Transact Business in Florida", register the above referenced foreign corporation	
Please return all correspondence concerning this matter	er to the following:	
MARK WALT	RS , and the same of the same	
(Name o	f Person)	
DECO PLAS	371CS	
(Firm/Co	ompany)	
2763 Mea	DOWOOD DRIVE.	
(Add	ress)	
WESTON, FL	- 33332	
(City/Sta	- 33332 ate/Zip) 5000031868156	
Should you need to call someone concerning this matter	-03/28/0001036001	
MARK WALTERS at (954) (Name of Person) (Area)	817-9008 Code & Daytime Telephone Number)	
	,	
STREET ADDRESS:	MAILING ADDRESS:	
Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	Qualification/Tax Lien Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following amount:	Tananassee, FL 52514 CONTACT SEED SEED SEED SEED SEED SEED SEED SEE	
♥ \$70.00 Filing Fee ♥ □ \$78.75 Filing Fee & □ Certificate of Status	\$78.75 Filing Fee & Service Status & 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. (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.) (State or country under the law of which it is incorporated) May 1, 2000
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) (Current mailing address) D EXPAND MY MAIL ORDER BUSINESS TO (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: MARK WALTERS

Office Address: 11870 STATE ROAD 84, SUITE #C8

DAVIE, FL,, Florida, 33325

(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 ac cept the obligations of my position as registered agents

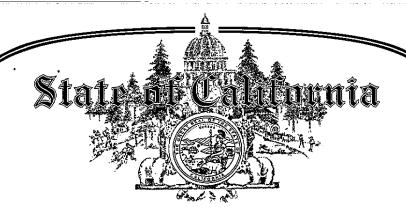
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

(Registered agent's signature)

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

MARK WALTERS, 2763 MEADOWOOD DRIVE, WESTON, FL 33332

A. DIREC	CTORS (Street address only - P.O. Box NOT acceptable)	
Chairman:	MARK WALTERS	
Address: _	2763 MEADOWOOD DRIVE	
	WESTON, FL 33332	
Vice Chair	man:	
Address: _		A CONTRACT OF THE PROPERTY OF
	المنافذة والمنافذ وال	The second secon
Director: _	MARK WALTERS	A STATE OF THE STA
	2763 MEADOWOOD DRIVE	
_	1/ , 5 2000 5	
Director: _	An Establish State (Section 1997) and the section of the section o	<del></del>
Address: _	The second of th	
_	The state of the s	
	CERS (Street address only - P.O. Box NOT acceptable)	200
President:	MARK WALTERS	C A T
Address: _	2763 MEADOWOOD DEIVE	
_	WESTON, FL 33332	- mg 3 6
Vice Preside	lent:	1 23 0 R
Address: _		<b>P</b>
_		
Secretary: _	MARK WALTERS	
Address: _	2763 MEADOWOOD DRIVE	The street of th
<u></u>	WESTON, FL 33332	THE THE
Treasurer:	MARK WALTERS	
Address:	2763 MEADO WOOD DRIVE	
	WESTON, FL 33332	
NOTE: If	f necessary, you may attach an addendum to the application listing additional officers and/or di	rectors
13. <u> </u>	Allak (110/12000000000000000000000000000000000	
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application of the control of	ation)
14	(Typed or printed name and canacity of person signing application)	HEMAN
	(action) are principle of the vilocity of the single single in Light of the control of the contr	•



## **SECRETARY OF STATE**

## CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, BILL JONES, Secretary of State of the State of California, hereby certify:

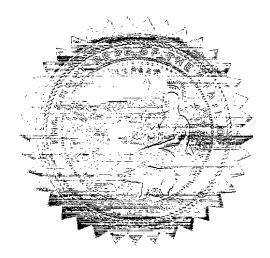
That on the **24TH day of NOVEMBER, 1992, ABC PLASTICS, INC.** became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of March 23, 2000.

BILL JONES Secretary of State