ACCOUNT NO.: 07210000032

REFERENCE: 680705

AUTHORIZATION:

COST LIMIT: \$ 70.00

ORDER DATE: May 1, 2000

ORDER TIME : 2:02 PM

ORDER NO. : 680705-005

CUSTOMER NO: 81325A

100003233081--2

CUSTOMER: Mr. Gregory S. Band

> LEVIN AND TANNENBAUM, P.A. LEVIN AND TANNENBAUM, P.A.

Suite 102

1680 Fruitville Road Sarasota, FL 34236

DOMESTIC FILING

NAME:

BAYPLAS1, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janine Lazzarini

EXAMINER'S INITIALS:

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section Division of Corporations
SUBJECT: BAYPLAGE TNC. (Name of corporation - must include suffix)
(Name of corporation - must include suffix)
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Phillip A. Wolff (Name of Person)
~~~
Levin Tannenbaum & Wolff (Firm/Company)
1680 Fruitville R1 # 102 (Address)   Sarasota, FL 34236   (City/State/Zip)
(Address)
Sarajota, FL 34236
(City/State/Zip)
Should you need to call someone concerning this matter, please call:    Phillip A. Wolff at (94) 3/6-0/// (Name of Person) (Area Code & Daytime Telephone Number)
Phillip A. Wolff at (941) 316-0111 (Name of Person) (Area Code & Daytime Telephone Number)
So the second
STREET ADDRESS: MAILING ADDRESS:
Qualification/Tax Lien SectionQualification/Tax Lien SectionDivision of CorporationsDivision of Corporations409 E. Gaines St.P.O. Box 6327Tallahassee, FL 32399Tallahassee, FL 32314
Enclosed is a check for the following amount:
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & □ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy Certified Copy

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

I COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO EGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	
BAYPLASI 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.)	4 C S S S S S S S S S S S S S S S S S S
(State or country under the law of which it is incorporated)  3. (FEI number, if applicable)	2
(State or country under the law of which it is incorporated) (FEI number, if applicable)	وکی
(Date of incorporation)  5.   Derpetual   (Duration: Year corp. will cease to exist or "perpetual")	
May 2, 2000 (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	_
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	
Suite 900 , 2 North Tamiami Trail  Sarosota Fl 34236  (Current mailing address)	3
Sarosota Fl 34231	<del>,</del>
(Current mailing address)	
Lawful activities under the laws of Delaware and investment  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	ŀ
Name: Phillip A. Wolff	
ffice Address: 11.00 Frishville Rd # 107	
Sarasota FL 34236 , Florida, 34236 (Zip code)	
Registered agent's acceptance:	
aving been named as registered agent and to accept service of process for the above stated corporation at the place designated in is application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply the the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept to abligations of my position as registered agent.	
(Registered agent's signature)	
Attached is a certificate of existence duly suthenticated not more than 00 days minute delicery of this and it at all	

- 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. DIRECT	ORS (Street address only - P.O. Box NOT acceptable)	nus SEPRETA	"JLED_	
Chairman: _	Howard Curd	JAVISION OF	CORPORTATE	
Address:	Suite 900, 2 N. Tamiami Trail	00 MAY -1	PM 2: 1.	
	Sarasota, FL 34236		- 44	
Vice Chairm	an:			<u>a 500</u>
Address:				13 1000
_				<u> </u>
Director:	Michael J. Schaefer			<b>19</b>
Address:	Suite 900, 2 N. Tamiami Trail			<b>\$</b> 1/2
	Sarasota, FL 34236			
Director: _	Kathleen Schaefer			
Address:	Suite 900, 2 North Tamiami Trail			
	Sarasota, FL 34236			
B. OFFIC	ERS (Street address only - P.O. Box NOT acceptable)			
President: _	Michael J. Schaefer	····-		<del></del>
Address:	Suite 900, 2 N. Tamiami Trail	<del> </del>		
_	Sarasota, FL 34236			
Vice Preside	nt: Kathleen Schaefer	-		
Address:	Suite 900, 2 N. Tamiami Trail			<u>.</u> -
	Sarasota, FL 34236			- · · · ·
Secretary: _				
Address:				<del></del>
Treasurer: _				
Address:				<del></del> -
NOTE: If	necessary, you may attach an addendum to the application listing	additional officer	rs and/or directors.	
13	dault		π.	
	(Signature of Chairman, Vice Chairman, or any officer liste	d in number 12 of	f the application)	· · · · · · · · · · · · · · · · · · ·
14I	Howard Curd, Chairman (Typed or printed name and capacity of p	erson signing app	lication)	

## State of Delaware Office of the Secretary of State

PAGE 1 ON CONTRACT OF STATE OF

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BAYPLAS1, INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-EIGHTH DAY OF

APRIL, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORT

MNY -1 PM 2: 44

Edward J. Freel, Secretary of State

AUTHENTICATION:

0409214

DATE:

04-28-00

3081770 8300

001218578