Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number

: (850)922-4003

From:

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

Phone : (305)541-3694

Fax Number

: (305)541-3770

FOREIGN PROFIT QUALIFICATION

NSU (IV), INC.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

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ICATION 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. NSU (IV), Inc.

ı <u>nşu</u>	(IV) Inc.			
(Name of corpo	retion; must include the	word "INCORPORATE!	o", "COMPANY", "CORPORATI	UN" OF
words or abbre	viations of like import in	i imguage as will clearly i	ndicate that it is a corporation inst	c 10 OL S
natural person (or parmership if not so c	ontained in the name at pr	csent.)	
			•	
		•	з. <u>5a. aaзьоь5</u>	
2. <u>De</u> 1	aware y under the law of which	(heteropooni si ti	(FEI mumber, if app	licable
(2 mis or commit	A miner me 18m of Amer	Tit is menthermal	(2 <u></u>	
А Дого	il 24, 2000	5	Perpetual	
	te of incorporation)	(Durat	ion: Year corp, will cease to exist	or "perpetual")
•		•		
6. <u>Apr</u>	<u>il 24, 2000</u>		C 607 1601 607 1503 and 917 15	5 F C)
(Date fits	t transpoted business in	Florida.) (SEE SECTION	S 607.1501, 607.1502 and 817.15	J. 2 .ds.j
- ~/~	·DiMaria & Go	dbout		
				*
33 1	Broad Street,		Boston, MA 02109	
		(Current mailing address)	
		te a night cl	sh hunimore	
8. <u>TO (</u>	own and opera	de a might car	atry to be carried out in state of Fl	mids)
(Purpose	(2) Of Corbotation protect	(INSECT BY HORITIC STRICE OF COM	my in so current our middle as a.	್ರೆಂ ೦
A 31	addrage of Floris	de registered exemts (1	P.O. Box or Mail Drop Box <u>N</u> o) Taccoumble)
y, pameanusu	LEST WANTERS OF EVENT	he isemiran ataun é		全帝 艺
Name:	Louis J. Te	rminello		TER TASS
144116-				SE C
DEFINA Address	2700 S.W. 3	7th Avenue		
Office waters.	-			
	Miami		, Florida, <u>33133</u>	<u> </u>
			(Zip code)	콜라 e
•			• • •	But O
10 Registered	agent's acceptance:			
TA: TinBmines				
Having been nam	ed as registered agent o	end to accept service of pr	ocess for the above stated corpor	uion at the place designated in
this analication. I	karahu necent tire opno	intmeut as registered opt	nt and agree to eat in this capacit	y. I further agrez to comply
with the provision	s of all statutes relative	to the proper and comple	te performance of my duties, and	l i um familiar with and accept
the obligations of	my position as register	र्व बहुद्दार्थ		
•	•	<u> </u>		
		(Registered agent's sig	nature)	
II. Attached is a	centificate of existence d	uly suthenticated, not mor	e than 90 days prior to delivery of	fikis application to the

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.

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

H000 CC028251

•	BOY NOT acceptable)
A. DIRECTO	RS (Street address only - P.O. Box NOT acceptable)
Chairman:	Elizabeth Romero
Address:	800 West Avenue, Apt. 518, Miami Beach, FL 33139
Address:	
- : -	
Director:	Elizabeth Romero
Address:	Elizabeth Romero 800 West Avenue, Apt. 518, Miami Beach, FL 33139
Di-sates	
Diffector	
D OFFICE	ERS (Street address only - P.O. Box NOT acceptable)
	7.0
President	800 West Avenue, Apt. 518, Miami Beach, FL 33139
Address:	800 West Avenue, Apt. 518, Miami Beach, FL 33139
	SS S
Vice Preside	nt:
V (C.C. 1 XOSS	
Address:	
	To be able to the second secon
Secretary: _	Elizabeth Romero 800 West Avenue, Apt. 518, Miami Beach, FL 33139
Address:	800 West Avenue, Apt. 518, Michiel December 1
Treasurer.	
Address: "	
•	The said of the contract of th
NOTE: I	f necessary, you may attach an addendum to the application listing additional officers and/or cirectors.
	(Constituted in number 12 of the application)
米13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14	Elizabeth Romero (Typed or printed name and capacity of person signing application)
	(Lyped or printed trains onto selected as a factorial and the

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EMPIRE CORP State of Delaware

305 541 3770 P.05/05

Office of the Secretary of State

I, EDWARD J. FREEL, SHCKETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MSU (IV), 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 FIRST DAY OF MAY, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MSU (IV).

INC. " WAS INCORPORATED ON THE TWENTY-FOURTH DAY OF APRIL, A.D.

2000

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

H0Q000028251

nward J. Freel, Secretary of State 0412070

AUTHENTICATION:

05-01-08

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3217121 8300

DATE: