

FOOOOOOO 3032

4.

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: Small Business Capital Corp.  
(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:

Alison Malkin 100003265011--0  
(Name of Person) -05724/00--01048--001  
Small Business Capital Corp. \*\*\*\*\*70.00 \*\*\*\*\*70.00  
(Firm/Company)  
11 N. Hampton Dr.  
(Address)  
Charleston, SC 29407  
(City/State/Zip)

Should you need to call someone concerning this matter, please call:

Alison Malkin at (843) 402-9592  
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

FILED  
00 MAY 29 AM 12:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

mt  
5/30

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee    ☐ \$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. Small Business Capital Corp.  
(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. Delaware 3. 13-3945010  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 4/24/97 5. Perpetual  
(Date of incorporation) (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.) in Florida
7. 150 Lake Carol Drive  
West Palm Beach, Florida 33411  
(Current mailing address)

8. Small Business Loans  
(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: Lance Brown

Office Address: 150 Lake Carol Drive  
West Palm Beach, Florida, 33411  
(Zip code)

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00 MAY 24 AM 12:05  
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TALLAHASSEE, FLORIDA

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.

  
(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. (Delaware)

See Attached

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

Alison Malkin 11 W. Hampton Dr., Charleston, SC 29407  
Lance Brown 150 Lake Carol Dr, WPB, 33411

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

Chairman: Allison Malkin

Address: 11 N. Hampton Dr.  
Charleston, SC 29407

Vice Chairman: ~~Andrea Brown~~

Address: 150 Lake Carol Drive  
West Palm Beach, FL 33411

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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

President: Allison Malkin

Address: 11 N. Hampton Dr.  
Charleston, SC 29407

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Allison Malkin

Address: 11 N. Hampton Dr.  
Charleston, SC 29407

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

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

14. Allison Malkin, President  
(Typed or printed name and capacity of person signing application)

*State of Delaware*  
*Office of the Secretary of State*

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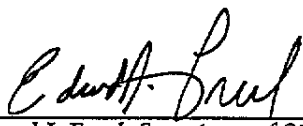
I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "PMSI INC.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "SMALL BUSINESS CAPITAL CORP.", THE TWENTY-SECOND DAY OF MARCH, A.D. 2000, AT 1 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

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

FILED  
00 MAY 24 AM 12:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



  
Edward J. Freel, Secretary of State

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AUTHENTICATION:

0363993

DATE:

04-06-00