

# F00000003652

## TRANSMITTAL LETTER

To: Qualification/Tax Lien Section  
Division of Corporations

MJH

SUBJECT: AutoGlo, Inc.  
(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:

James Walton  
(Name of Person)  
AutoGlo, Inc.  
(Firm/Company)  
7340 Ashley Shores Circle  
(Address)  
Lake Worth, FL 33467  
(City/State/Zip)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 JUN 22 AM 9:39

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

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\*\*\*\*\*70.00 \*\*\*\*\*70.00

James Walton at ( 561 ) 969-6847  
(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

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. AutoGlo, 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.)
2. Delaware 3. 65-0866399  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 2/26/98 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 9/1/00  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 7340 Ashley Shores Circle, Lake Worth, FL 33467  
  
(Current mailing address)

8. Manufacture of dental supplies  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

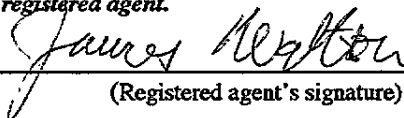
9. **Name and street address of Florida registered agent:** (P.O. Box or Mail Drop Box NOT acceptable)

Name: James Walton

Office Address: 7340 Ashley Shores Circle  
Lake Worth, Florida, 33467  
(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 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.

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

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

Chairman: James Walton

Address: 7340 Ashley Shores Circle

Lake Worth, FL 33467

Vice Chairman: N/A

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

Director: Donald Walton

Address: 10 Pleasant Ridge Run

Goshen, NY 10924

Director: David Walton

Address: 25 Denman Rd.

Middletown, NY 10940

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

President: James Walton

Address: 7340 Ashley Shores Circle

Lake Worth, FL 33467

Vice President: N/A

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

Secretary: N/A

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

Treasurer: N/A

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

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

13. \_\_\_\_\_

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

14. \_\_\_\_\_

(Typed or printed name and capacity of person signing application)

*State of Delaware*  
PAGE 1  
*Office of the Secretary of State*

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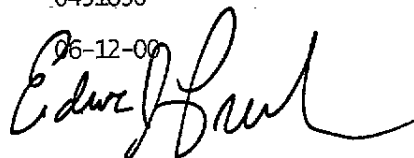
I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "AUTOGLO, INC." IS DULY INCORPORATED  
UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING  
AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF  
THIS OFFICE SHOW, AS OF THE TWELFTH DAY OF JUNE, A.D. 2000.

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06-12-00



Edward J. Freel, Secretary of State



AUTHENTICATION:

DATE: