

To: Registration Section Division of Corporations	
SUBJECT: Old Grand Dad Inc	
(Name of corporation - must include suffix)	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Busin "Certificate of Existence", and check are submitted to register the above referenced for transact business in Florida.	ness in Florida", eign corporation to
Please return all correspondence concerning this matter to the following:	
0 0 10000	9392431 1
Rebecca P Stostamore -03/ (Name of Person)	13/0001103002 #70.00 *****70.0
	W-22691
(Firm/Company)	
935 W) WAShington St.	
935 W. WAShington St. (Address)	<u> </u>
Monticello El 30344	
Monticollo, Fl 32344 (City/State/Zip)	_
Should you need to call someone concerning this matter, please call:	700
	ALC:
(Name of Person) at (850) 997-3110 (Area Code & Daytime Telephone Nu	
(Name of Person) (Area Code & Daytime Telephone Nu	umberk da E
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STREET ADDRESS: MAILING ADDRESS:	DA S
Registration Section Registration Section	
Division of Corporations 409 E. Gaines St. Division of Corporations P.O. Box 6327	unt
409 E. Gaines St. P.O. Box 6327 Tallahassee, FL 32399 Tallahassee, FL 32314	47stu
Enclosed is a check for the following amount:	10/5
(TVP70 00 Filt - F	
Certificate of Status Certified Copy Ce	7.50 Filing Fee, entificate of Status & entified Copy



FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

September 18, 2000

REBECCA STOUTAMIRE 935 W. WASHINGTON ST. MONTICELLO, FL 32344

SUBJECT: OLD GRAND DAD, INC. Ref. Number: W00000022691

We have received your document for OLD GRAND DAD, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays Document Specialist

Letter Number: 400A00048993

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) (FEI number, if applicable) (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) (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 Office Address: 935 W. WAshine 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 agents (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 business addresses of officers and/or directors: A. DIRECTORS Chairman: Vice Chairman: Address: Director: _ Address: ____ Director: Address: **B. OFFICERS** President: Vice President: Address: __ Secretary: Address: ____ Treasurer: ___ Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Reheaca P. Stoctamire President

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

State of Delaware

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OLD GRAND DAD, 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-FIFTH DAY OF SEPTEMBER, A.D. 2000.

OO OCT -5 AN 8: 15
SECRETARY OF STATE



Edward J. Freel, Secretary of State

AUTHENTICATION: 0695630

DATE: 09-25-00

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