# F0000006691

#### TRANSMITTAL LETTER

Division of Corporations			
SUBJECT: Exodus Moving and Storage Incorporated (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 Aaron D. Merck (Name of Po	o the following: 100	0034800317 -11/29/0001071002 ******78.75 *****78.75	
Exodus Moving and S	torage Inc.		
6521 22 nd St. (Address	(S)	<b>—</b> — — — — — — — — — — — — — — — — — —	
St. Peters burg, FL GCity/State and	33712		
City/State and	d Zip code)		
For further information concerning this matter, please call  Aaron D. Merck at (727  (Name of Person) (Area Co		C C	
Registration Section Division of Corporations 409 E. Gaines St.	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	17ATE 47CT	
Enclosed is a check for the following amount:		12/4	
	\$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. Exodus Moving and Storage Incorporated	_
(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. Colorado (State or country under the law of which it is incorporated)  3. 84-1358916 (FEI number, if applicable)	
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. 10/03/96  (Date of incorporation)  5. Perpetual  (Duration: Year corp. will cease to exist or "perpetual")	_
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	, ,
6. upon qualification	
6. <u>upon qualification</u> (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.)	
7 2215 Sun Rose Way Ft. Collins CO 80521	
7. 2215 Sun Rose Way, Ft. Collins CO 805 ZI (Principal office address)	-
113 Hickory St., Ft. Collins, CO 80524  (Current mailing address)	
(Current mailing address)	
8. residential and commercial relocation (moving) services	
8. <u>residential and Commercial relocation (moving) services</u> (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	-11
8. <u>residential and Commercial relocation (moving)</u> <u>Services 25</u> (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 25  9. Name and <u>street address</u> of Florida registered agent: (P.O. Box or Mail Drop Box <u>NOT</u> acceptable) 36	FILED
Name: Aaron D. Merck	Ö
Name: Haron D. Merck  Office Address: 6521 22nd St. South #497	•
St. Peters burg, Florida 3371Z (City) (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.

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: \_\_\_\_ Address: B. OFFICERS President: Ilan Levy Address: 2215 Sun Rose Way Ft. Collins, CO 80521 Vice President: Louisann Levy Address: ZZ15 Sun Rose Way Ft. Collins, CO 80521 Secretary: Ilan Levy Address: 2215 Sun Rose Way, Ft. Collins, CO 80521 Treasurer: <u>Flan Levy</u> Address: <u>2215</u> Sun Rose Way, Ft. Collins, CO 80521 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. Tlan Levy - President (Typed or printed name and capacity of person signing application)

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# STATE OF COLORADO

## DEPARTMENT OF STATE

### **CERTIFICATE**

I, DONETTA DAVIDSON, SECRETARY OF STATE OF THE STATE OF

COLORADO HEREBY CERTIFY THAT

ACCORDING TO THE RECORDS OF THIS OFFICE

EXODUS MOVING AND STORAGE, INC. (COLORADO CORPORATION)

FILE # 19961129160 WAS FILED IN THIS OFFICE ON October 03, 1996
AND HAS COMPLIED WITH THE APPLICABLE PROVISIONS OF THE
LAWS OF THE STATE OF COLORADO AND ON THIS DATE IS IN GOOD,
STANDING AND AUTHORIZED AND COMPETENT TO TRANSACT BESINESS
OR TO CONDUCT ITS AFFAIRS WITHIN THIS STATE.

Dated: October 26, 2000

V 29 MY 2: 18
IARY OF STATE
IARY OF STATE

Donetta Davidson

SECRETARY OF STATE