

TO: Registration Se Division of Co				
SUBJECT: M	.V.I. Inc.			
Songhor.	(Name of corporation	on - must include suffix)	· · · · · · · · · · · · · · · · · · ·	
Dear Sir or Madam:				
	tion by Foreign Corporation for e", and check are submitted to r	register the above referenced	oreign corporation	
			0 003484 0 <u></u> 0 <u>0/</u> 04/20	784 4 1096004
Please return all corresp	pondence concerning this matter	to the following:	*****70.00	*****70.00
	awn Gillesp	ic		· · ·
	(Name of	Person)		
M.	V.I. Inc.		-	
	(Firm/Co	mpany)	-	
101	150 Daniels	'YKWV		
	(Addr	ress)		
F+	Myers, FL	. 33913		-
	(City/State a	and Zip code)	**********	
For further information	concerning this matter, please of	call:		
Name of Person		Oode & Daytime Telephone N	941-768-37 (umber)	222
STREET ADDRESS: Registration Section Division of Corporation 409 E. Gaines St. Tallahassee, FL 32399		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	OO DEC TALLAH	
Enclosed is a check for	the following amount:		<u> </u>	-
\$70.00 Filing Fee	<u>-</u>	\$78.75 Filing Fee & Certified Copy	\$87.50 Fitting Fee Certificate of Statu Certified Copy	

Dec. 7, 2000

M.V.I. Inc.

DBA: Krystal Inn & Suites 10150 Daniels Parkway Ft. Myers, FL 339133

Registration Section
Division of Corporations
Attn. Shawn Logan
409 E. Gaines St.
Tallahassee, FL 32399

To whom it may concern,

Please accept this letter as our Corporate Resolution of Board of Directors for M.V.I. Inc. We wish to adopt the alternative name N.D.Y. Inc. to use when conducting business in the state of Florida. We understand that there is already a company doing business as M.V.I. Inc. in the state of Florida.

Sincerely,

Tom Yenish, Chairman

Norb Yenish, President

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) (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.) (Principal office address) (Current mailing address) (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: Office Address: 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 business addresses of officers and/or directors:

A. DIRE		
Chairman:	Tom Yenish	
Address: _	647 Nuna Ave., Lot 3	_
	Ft. Myers, FL 33905	
Vice Chairr	man:	
Address: _		-
Director: _		
Address: _		
		_
Director: _		
Address: _		
B. OFFIC	k 1	
President:	Norb Yenish	_
Address: _	647 Nuna Ave. Lot 3	
_	Ft. Myers, FL 33905	
Vice Presid	ent: Donna Venish	
Address: _	1092 West Cliff Curve	
_	Shoreview, MN. 55126	
Secretary:	Patti Venish	
Address: _	8030 Mt. Curve Blvd., Brooklyn Park, MN 55445	
Treasurer:	Diane Lang	
Address: _	459 Thompson Ave. W., West St. Paul, MN 55118-302	26
NO.		
	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.	Tom Venish, Chairman.	
.	(Typed or printed name and capacity of person signing application)	

state of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

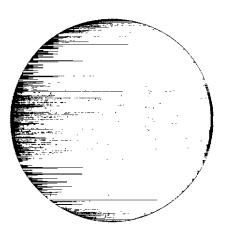
I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: M.V.I., Inc.

Date Formed: 05/15/1984

Chapter Governed By: 302A

This certificate has been issued on 11/28/00.



Mary Kiffneyer Secretary of State.