

TRANSMITTAL LETTER

| To: Registration Section . , | | |
|--|--|---|
| Division of Corporations | | |
| SUBJECT: NATIONWIDE CON | UTRACTING EMPLOYMEN | ITSGRUICE THE |
| (Name of | corporation - must include suffix) | |
| | 905 - 1 | |
| Dear Sir or Madam: | | 734891736 766760-91042-013 |
| The enclosed "Application by Foreign Corpor "Certificate of Existence", and check are subn transact business in Florida. | ation for Authorization to Transact Busine | *****78.75 *****78.75 ess in Florida", ign corporation to |
| | | W-28985 |
| Please return all correspondence concerning the | - | |
| CHARLES FO | RSHEE | |
| | Name of Person) | _ |
| NATION WIDE CO | Firm/Company) | SERVICE INC. |
| | | |
| 201 PARK PL | Suit 8 309 | |
| | (Address) | _ |
| ALTAMONTE SPA | (City/State/Zip) | |
| | (City/State/Zip) | - |
| | | |
| Should you need to call someone concerning the CHARLES FORSHEE at (Name of Person) | nis matter, please call: | 00 SEC |
| CHAPLES EDUSHEE +1 | 1/22 21 5 - 10 25 | 三 日 五 |
| (Name of Person) | (Area Code & Daytime Telephone Num | |
| , | (ruea code & Daytime Telephone Num | |
| | | F ST |
| STREET ADDRESS: | BEATT INC. A DEDUCA | ₩ · · · |
| THE PRESS. | MAILING ADDRESS: | 22 RIDA |
| Registration Section | Registration Section | \ |
| Division of Corporations | Division of Corporations | unt |
| 409 E. Gaines St. Tallahassee, FL 32399 | P.O. Box 6327 | 1 |
| Taranasco, 1 1 32399 | Tallahassee, FL 32314 | 4ntr |
| Enclosed is a check for the following amount: | | |
| \$70.00 Filing Fee Certificate of State | Con | 50 Filing Fee, tificate of Status & tified Copy |

FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 11, 2000

CHARLES FORSHEE 201 PARK PL, STE 309 ALTAMONTE SPRINGS, FL 32701

SUBJECT: NATIONWIDE CONTRACTING EMPLOYMENT SERVICE, INC.

Ref. Number: W00000028985

We have received your document for NATIONWIDE CONTRACTING EMPLOYMENT SERVICE, INC. and your check(s) totaling \$78.75. 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 plays of 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: 200A00062295

FILED

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. | NATION WIDE CONTRACTING EMPLOY MENT SERVICE INCORPORATED Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or |
|----------------|--|
| V | 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 59-3681663 |
| (\$ | State or country under the law of which it is incorporated) 3. <u>59-3681663</u> (FEI number, if applicable) |
| 4. | 11-03-2000 5. PERPETUAL |
| _ | //- 03 - 2000 5. PERPETURAL (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") |
| 6. | 12-15-2000 |
| Œ | 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. a. | . 201 PARK PLACE SUITE 309 ACTAMONTE SPG. FC 3270/ (Principal office address) |
| | (Principal office address) |
| b | Current mailing address) |
| | (Current mailing address) |
| | |
| 8 | (Purpose(s) of corporation outhorized in home state or country to be comised out in state of Florida (1977) |
| | (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) [ame and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) |
| 9. N | lame and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) |
| | Name: CHARLES P. FORSHEE |
| Offic | ce Address: 201 PARK PLACE SUITE 309 |
| | ACTAMONTE SPG. FL, Florida 3270/ (Zip code) |
| | (Zip code) |
| 10. | Registered agent's acceptance: |
| in thi comp | ing been named as registered agent and to accept service of process for the above stated corporation at the place designated is application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to ply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with 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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:

| A. DIRECTORS | |
|---|--|
| Chairman: CHARLES P. FORSHEE | |
| Address: 201 PARK PL, SUITE 309 | |
| ALTAMONTE SPG FL 3270/ | |
| Vice Chairman: | |
| Address: | |
| | |
| Director: | - |
| • | ······································ |
| Address: | |
| Director | |
| Director: | |
| Address: | |
| B. OFFICERS | |
| President: | |
| Address: 201 PARK PLACE SUITE 309 | |
| ALTAMONTE SPG, FL 3270/ | |
| Vice President: CHARLES P. FORSHEE | |
| Address: 201 PARK PLACE SUITE 309 | |
| | |
| ALTHMONTE SP9, FL 32701 | <u> </u> |
| Secretary: | |
| Address: | |
| | A 70 |
| Treasurer: | |
| Address: | |
| | |
| NOTE: If necessary, you may attach an addendum to the application listing additional of | ficers and/or directors. |
| 3. Charles farther | ~ |
| (Signature of Chairman, Vice Chairman, or any officer listed in number 1 | 2 of the application) |
| 4 | |
| (Typed or printed name and capacity of person signing a | application) |

State of Delaware

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Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NATIONWIDE CONTRACTING EMPLOYMENT SERVICE" 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 DECEMBER, A.D. 2000.

OO DEC 18 AM II: 22
SECRETARY OF STATE

Edward J. Freel, Secretary of State

AUTHENTICATION: 0847274

001619839

DATE: 12-12-00

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