FOODDOOD 1104

TO:	Registration of Division of the Control of the Cont	on Section of Corporation	is		e B	
SUBJ	ECT•	LABLE	PLACERS.	INC.	MIN	
SODJ.			(Name of corpor	ation - must include su	ffix)	
Dear S	ir or Madan	n:				
"Certif to trans	ficate of Exi sact busines	istence", and ss in Florida.	check are submitted	to register the above re	ransact Business in Florida", eferenced foreign corporation 500035046 -12/19/00011 *****70.00	j 7 950
Please		_		atter to the following:	**************************************	
		_ Hester	L. MEAUX	e of Person)		_
	,	n 4	,	·		
		ニトラレビ !	CACERS, INC.	/Company)		_
		td.aa ki	•	• • •		
		420 10.	(A	Address)	,	
			`	•	OBC OEC	CO. In
		[RCC AG	(City/St	ate and Zip code)		
For fu	rther inform		sing this matter, plea		A H 9:	
	CHET (Name of	MEAUX Person)	at (<u>85</u>	0 591-55 rea Code & Dayume Te	8 7 elephone Number)	Tions
Regist Division 409 E.	ET ADDRI ration Secti- on of Corpo Gaines St. assee, FL 3	on orations	-	MAILING ADD Registration Sect Division of Corpo P.O. Box 6327 Tallahassee, FL	ion orations	
Enclos	sed is a chec	ck for the foll	owing amount:			
	0.00 Filing I	Fee 🗆 \$7	8.75 Filing Fee & ertificate of Status	□ \$78.75 Filing Fee Certified Copy	e &	us &

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.

	E PLACERS, 1				
words or abbrev natural person o	ration; must include the wor iations of like import in lan r partnership if not so conta	guage as will clearly ined in the name at p	indicate that it is a corresent.)	rporation instead of	r a
DELAW	RRE	3.	52-225	59343	
(State or countr	y under the law of which it	is incorporated)	(FEI	number, if applicabl	.e)
Augus	e of incorporation)	5.	PERPET	UAL	
(Date	of incorporation)		(Duration: Year cor	p. will cease to exist	or "perpetual")
. UPO	U QUALIFICAT	100			
(Date first transa	cted business in Florida. If (SEE S	corporation has not ECTIONS 607.1501	, 607.1502 and 817.15	5, F.S.)	
1220	N. MARKET	STREET	SUITE 606	5 WILMING	TON, DE 19801
	(Principal office add	ess)		
210	W. BRADFORD	RD, PMB	ZOI, TALLAHA	SSEE FL 32	303-4860
	(Current mailing add	ress)		
. Name and <u>str</u>	s) of corporation authorized eet address of Florida	registered agent:	(P.O. Box or Mail I		ceptable)
Name:	CHESTER L.	MEAUX			DEC
Office Address:	1420 N. MER	IDIAN RD. A	PT 208		a and a second
	TALLAHASSEE (City)		, Florida <u>3</u>	2303	
	(City)		(Zij	p code)	99 55
0 Pagistared s	gent's acceptance:				ATT 29
Having been nan	ned as registered agent o	and to accept servi	ce of process for the	e above stated corj	poration at the plac
lesignated in thi	s application, I hereby a	ccept the appoints	nent as registered a _t	gent and agree to	act in this capacity.
urther agree to duties, and I am	comply with the provision familiar with and accep	ns of au statutes i t the obligations o	etative to the proper f my position as reg	istered agent.	yormance of my
_	1 to	Elley			
	(Registered agent's si	gnature)		

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: Chester L. Meaux

Address: 1420 N. Meridian RD, Apt 208

TALLAHASSEE, FL 32303

Vice Chairman: Dauid P. Meaux

Address: 15939 lay Bridge Laue

Houston, TX 77095

Director:

Address:

B. OFFICERS

President:	CHESTER L. MEAUX
Address: _	1420 N. MERIDIAN RP., APT. 208
	TALLHAMSSEE, FL 32303
	ent: DAVID P. MEAUX
Address: _	15939 luy Bridge LAUE
_	HOUSTON TX 77095
Secretary:	CHESTER L. MEAUX
	1420 N. MERIDIAN RD., APT. 208, TALLAHASSEE FL 32303
	CHESTER L. MEAUX
Address:	1420 N. MERIDIAN RD., APT. 208, TALLAHASSEE, FL 32803
_	

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

CHESTER L. MEROX PRESIDENT
(Typed or printed name and capacity of person signing application)

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

tellhen

State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CABLE PLACERS, 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 THIRTEENTH DAY OF

DECEMBER, A.D. 2000.

dward J. Freel, Secretary of State
AUTHENTICATION: 0851053

3273553 8300

001623263

DATE: 12-13-00