CT GRECRATION SISTEM OF CORPORATION(S) NAME EIM Resources Inc.

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() Nonprofit	() Amendment	() Merger
() Foreign	() Dissolution/Withdrawal	() Mark
- Qualitication	() Reinstatement	() Mark
() Limited Partnership	() Annual Report	() Other
()LLC	() Name Registration	() Change of RA
	() Fictitious Name	() UCC
(v) Certified Copy	() Photocopies	() CUS
() Call When Ready	() Call If Problem	() After 4:30
(x) Walk In	() Will Wait \ \ \ \	(x) Pick Up
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W.P. Verifier		Amount: \$

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

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TRANSMITTAL LETTER

TO: Registration Section		T ST
Division of Corporations		ORIE ST
SUBJECT: E.I.M. Resour (Name of corpora	ces, Inc.	
(Name of corpora	tion - must include suffix)	,
Dear Sir or Madam:		-
The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to transact business in Florida.	or Authorization to Transact Busi o register the above referenced for	iness in Florida", oreign corporation
Please return all correspondence concerning this mat	ter to the following:	
Patricia C. Mei		
Name	of Person)	
EIM Resources,	Tur.	
(Firm/C	Company)	·
1790 Forest Pon	dlane	
(Ad	dress)	
ROSWIL, 6A 300 (City/State	275	
(City/State	and Zip code)	· <u>· · · · · · · · · · · · · · · · · · </u>
For further information concerning this matter, please	call:	-
Patricia Meredith at (40 (Area	4,229-1774	
(Name of Person) (Area	Code & Daytime Telephone Nur	mber)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	-
Enclosed is a check for the following amount:		
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status	Certified Copy Co	7.50 Filing Fee, ertificate of Status & ertified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANO REGISTER A FO	CE WITH SECTION 607.1503, FLORI OREIGN CORPORATION TO TRANS.	IDA STATUTES, THE FOLLOWING IS SUBMITTED TO SACT BUSINESS IN THE STATE OF FLORIDA,	
1. ET.	M. Resources, Ir		
(Name of cope	oration; must include the word "INCORPO	ORATED" "COMPANY" "CORPORATION"	
words or abbre	eviations of like import in language as will of or partnership if not so contained in the national contained in the nation of partnership if not so contained in the national	clearly indicate that it is a corporation instead of a	
_	rgia	TO 241000	
(State or count	try under the law of which it is incorporated	ed) (FEI number, if applicable)	
4	9/8/98	5. Peroetual (Duration: Year corp. will cease to exist or "perpetual")	
	ite of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	*
6. Opte first trans	QUALIFICATION -	DUE TO OPEN 2/10/01	-
(and more dame)	(SEE SECTIONS 607	pas not transacted business in Florida, insert "upon qualification.") 7.1501, 607.1502 and 817.155, F.S.)	
7. 1790	Forest Pond Lar	1e-Roswell, G-A 30075	
/	(Principal office	ce address)	-
<u> San</u>	(Current mailing		
		-	
8. Openir	19 a bulk candy	or country to be carried out in state of Florida)	
'(Purpose(s) of corporation authorized in home state	or country to be carried out in state of Florida)	
9. Name and <u>str</u>	eet address of Florida registered age	ent: (P.O. Box or Mail Drop Box NOT acceptable)	
Name:	CT Comporation	System	
Office Address:	•	re Island Rd.	
	$\frac{f'(City)}{(City)}$, Florida 33324 (Zip code)	
10. Registere d a	gent's acceptance:	\ <u>r</u> ,	
Having been nam	ned as registered agent and to accent s	service of process for the above stated corporation at the place	
resignated th this	s upplication, I nereby accept the appa	ointment as registered agent and agree to act in this capacity. I stee the proper and complete performance of my	
duties, and I am f	familiar with and accept the obligation	ons of my position as registered agent.	
		CONNIE BRYAN	
	Paris	SPECIAL ASSISTANT SECRETARY	
	(Registered agent	t'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: <u>Patriciac Meredith</u>	
Address: 1790 Forest Pout Lane	1 SEC
Roswen GA. 300 75	PEC CO.
Vice Chairman: Lara Bingeman	SET OF THE
Address: 1790 Forest Pond Lane	FST
Roswen GA 30075	DET SS
Director: Robert F Mere dith	
Address: M90 Forest Pond Lane	7 (200) 1 (1) (1) (1) (1) (1) (1) (1) (1) (1)
Roswell, GA 30075	
Director: Alongo B Meredith	The state of the s
Address: 1790 Forest Pond Lane	
Roswen GA 30075	The state of the s
B. OFFICERS	
President: Robert F. Meredith	
Address: 1790 Forest Pond Jane	
Roswell, SA 30075	
Vice President: Alonzo B. Meredith	
Address: 1530 Bain Buidae James	<u></u>
ROSUMIL MA 30005	· · · · · · · · · · · · · · · · · · ·
Secretary: Patricia C. Mere dith	
Address: (1790 Sprest Pond Law - Ro	ELLIA MAZONAE
Townson & ROMA O	3000, X/1 300, D
	<u> </u>
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional of	fficers and/or directors.
13 Datacia C Meredith	
(Signature of Chairman, Vice Chairman, or any officer listed in number 1	2 of the application)
14	
. Ji F and supurty of person signing application	11.7

(CONTINED—- addendum)
TT. Names and business addresses of officers and/or directors:

	DIDECTOR
Α.	DIRECTORS

airman:		<u> </u>		<u> </u>		
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OFFIC	Λ					
edent:	Lara Bingeman	th				
ess:	03 Bounty Court					
ess:	Drocking Cource	10	-		<u> </u>	
	ACONORI, VAT 240	<u> </u>			-max - 1 + + + + + + + + + + + + + + + + + +	<u> </u>
Presider	nt: Carl Parlato			· Ann	·	
ess:	431 Kink Road					
	Decotus MA 3000	50				
	CALCULATION - DUC	<i>)</i> (<u></u>	<u> 20 − 1 17 .</u>	<u>+::-</u> .
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Έ· If »	ecessary you may attach an all-live view you	46.4				
	ecessary, you may attach an addendum to the applicatio					
	(Signature of Chairman, Vice Chairman, or any office	<u> </u>		· · · · · · · · · · · · · · · · · · ·	पर , व	
	(Signature of Chairman, Vice Chairman, or any office	cer listed in nur	nber 12 o	f the applic	ation)	
	(Typed or printed name and capacity of pers					

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CONTROL NUMBER : K8334.62 DATE INC/AUTH/FILED: 09/08/1998 JURISDICTION : GEORGIA

PRINT DATE : 02/07/2001 : 211

FORM NUMBER

CT CORPORATION SYSTEM DENISE PFANNKUCHE 1201 PEACHTREE STREET, N.E. ATLANTA, GA 30361

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of S he state of Georgia, do hereby certify under the seal of my office t brint date

RESOURCES, INC

is in compliance with the applicable filing egistration provisions of Title 14 of the Official Code of Georgia Annotated

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date and has not filed articles of dissolution, certificate of cancellation or any other similar document with the Office of the Secretary of

This certificate relates only to the legal existence of the above-named entity as of the print date above. It does not certify whether or not a notice of intent to dissolve an application for windrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

20010207184102597

Cathy Cox Secretary of State