	TRANSMITTAL LETTER	
To: Registration Section Division of Corporations SUBJECT: DECEMBER	Suther Hissocianes	ING
υσ <i>ου</i> σου <u>γ σα σ σ γ γ</u>	(Name of corporation - must include suffix)	
Dear Sir or Madam:		
The enclosed "Application by For "Certificate of Existence", and ch	reign Corporation for Authorization to Transact leck are submitted to register the above reference	Business in Florida", d foreign corporation t

The enclosed "Application by Foreign Corpo "Certificate of Existence", and check are subr	ration for Authorization to Tr mitted to register the above re	ransact Business in eferenced foreign co	Florida", orporation to
transact business in Florida.			
Please return all correspondence concerning	his matter to the following:	ار کا کے کہا گئے گئے ۔''' ''' ماہد علمہ علمہ علمہ علمہ	/00010/1700) 8.75*******
PETER K	ETTER		O. (O. 400-9-505-(D
	(Name of Person)		
1) Tectom S	ROTRER + AS	SOCIMES	(7)
	(Firm/Company)		
6-611 Ac	ambor St.		W-36348
	(Address)		W - 30 v (i
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VMCAJVA	1 BC 16A	16/	
	(City/State/Zip)		
	1,		
Should you need to call someone concerning	this matter, please call:		
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1/200	157 200-0	1911:	
PETER ROTTLOC at	(684) 255-5		00
(Name of Person)	(Area Code & Daytime T	Felephone Number	
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Registration Section	Registration Secti		: 51
Division of Corporations	Division of Corpo	orations 🚎 '	,
409 E. Gaines St.	P.O. Box 6327		int
70.11-1 DI 20200	Tallahaccaa FI '	4741A	7 1 1 3V~

Tallahassee, FL 32399

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

\$78.75 Filing Fee & Certificate of Status

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☐ \$78.75 Filing Fee & Certified Copy

☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 29, 2000

PETER KETTLER 6-611 ALEXANDRIA ST. VANCOUVER BC V6A 1E1,

SUBJECT: WILLIAM SWIREX & ASSOCIATES, INC.

Ref. Number: W00000030348

We have received your document for WILLIAM SWIREX & ASSOCIATES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The registered agent must sign accepting the designation.

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 days or 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: 000A00064881

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. <u>INTECTION</u> SUDTEXT ASSOCIATES TWO CORPORATED (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. FUTNOTS 3. 98-0157610			
(State or country under the law of which it is incorporated) 4. 2/6/9 (Date of incorporation) (FEI number, if applicable) (Duration: Year corp. will cease to exist or "perpetual")			
6. UPON QUARTECATION (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. 2. 1855 GRIFFIN KOAD, C420, DANTA, FC 33004			
6. 6-61/ REXAMBERG. VANZOVER BC V640164			
(Current mailing address)			
8. FURNITURE WHOLESMEN			
(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: WAYNE 1. Wise			
Office Address: 1855 GRIFFIA Road, SviTE C-420			
Davi's Beach, , Florida 33004 (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. (Registered agent's signature)			
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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.

(Typed or printed name and capacity of person signing application)

File Number ___ 6035-097-3



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do





In Testimony Whereof, I, hereto set

Desse White