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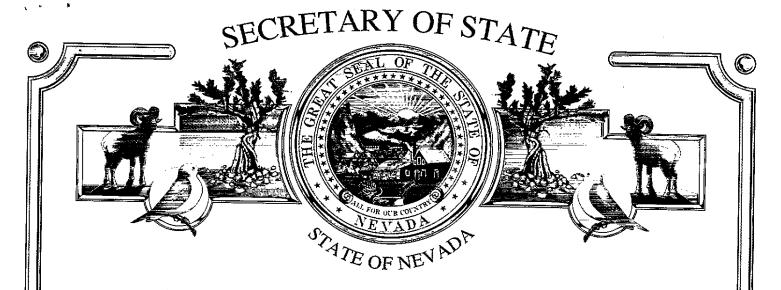
TO: Registration Section Division of Corporations	
SUBJECT: Name of corporation - must include suffix)	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following: -03/19/01-01089-00 *****87.50 *****87	6 .50
NATS INCORPORATED	
372 HOUND RUN PL	,
CASSI/berry 4 (Address) (City/State and Zip code)	
For further information concerning this matter, please call:	
T Scott at (32) 777-9396 ES Common (Area Code & Daytime Telephone Number)	
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following amount: 3 \$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & \$78.75 Filing Fee & \$78.75 Filing Fee & \$78.75 Filing Fee & \$78.75 Filing Fee & \$78.75 Filing Fee & \$78.75 Filing Fee & \$78.75 Filing Fee & \$78.75 Filing Fee & \$78.75 Filing Fee & \$78.75 Filing Fee & \$78.75 Filing Fee & \$78.75 Filing Fee & \$78.75 Filing Fee & \$78.75 Filing Fee &	
S70.00 Filing Fee S78.75 Filing Fee & S78.75 Filing Fee & S87.50 Filing Fee, Certificate of Status Certified Copy S87.50 Filing Fee, Certified Copy Certified Copy	3

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. NATS INCORDORATED
(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. NeuAda 39 -210/0110
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. february 23-2001 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. UPON CUALITICATION (Date first transported business in Florida 15 compension has not delivery in Florida 15 co
(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. 372 HOUND KUN IL CASSE/BURRY FL 32707
377 Hald Run Principal office address)
(Current mailing address)
8. Provider of Cargo Transportation Services
(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: <u>Ve Ira C. Del VAIle</u>
Office Address: 372 HOUND RVW PL
CASSe/berry Florida 32707
(City) (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.
Petra III Valle
(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 dusiness addresses of officers and/or dire	ctors:
'A. DIRECTORS	
Chairman: Kichald Vieu	<u>S</u>
Address: 372 Hound Run Pa	/
Casselberry JL 33	7707
Vice Chairman:	
Address:	
Director: Petra C. Dell	la 11e
Address: 372 HOUNG KUN	PL
CASSE/BERRY 3L 3	2707
Address:	
President: Kichard View Address: Same Above	S
Vice President:	O SE
Address:	
Secretary: Petra Del Ud	ule = = = = =
Address: Same Above	55.9
Freasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the app	lication listing additional officers and/or directors.
13. Liebert Diene	λ
	ry officer listed in number 12 of the application)
4. Richard Wieves	
(Typed or printed name and capacity	or person signing application)



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **NDTS INCORPORATED**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since February 23, 2001, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto seeiny hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on March 8, 2001.

Den Helle

Secretary of State

Ву

Certification Clerk