FOLOCOOS 3686 TRANSMITTAL LETTER

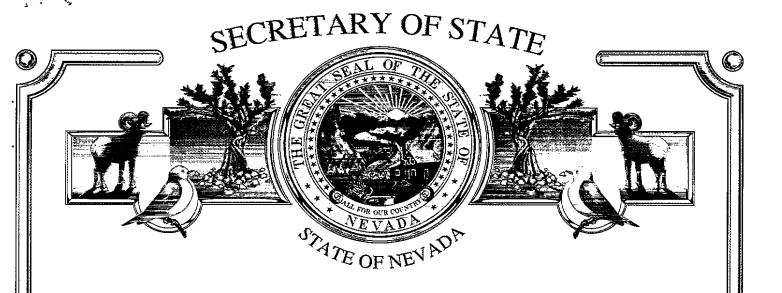
TO: Registration Section Division of Corporations	
SUBJECT: ONE TEAM, CORP.	
(Name of corporation - must include suffix	(1)
Dear Sir or Madam:	ere in the second of the secon
The enclosed "Application by Foreign Corporation for Authorization to Trans "Certificate of Existence", and check are submitted to register the above refere to transact business in Florida.	act Business in Florida", enced foreign corporation
Please return all correspondence concerning this matter to the following: MABK W. HUGHES	
ONE (BAM, COBP.	
8065 MIZNER LANE	
BOCA RASON, FL. 33433	
(City/State and Zip code)	
For further information concerning this matter, please call: N. WAYNEHUGHES at (207) 476-80 (Name of Person) (Area Code & Daytime Teleph	00044689168 -07/11/0101031006 *****78.75 *****78.75 047 none Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Fallahassee, FL 32399 Enclosed is a check for the following amount: The STO ON Filter Flow of The STO TE Filter Flo	FILED STATE HASSEE, FLORIDA
☐ \$70.00 Filing Fee	S87.50 Filing Fee, Certificate of Status & 7 / 12

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.
1 ONE TEAM, COBP.
(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 correspond in the
natural person or partnership if not so contained in the name at present.)
2. NEVADA (State or country under the law of which it is incorporated) 3. Applied for 6-70-01 (FEI number, if applicable)
4. Date of incorporation) 5. Perperual (Duration: Year corp. will cease to exist on "hermeture")
(= total corp. will course to exist of perpetual)
6. UPON QUALIFICATION
(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. 101 No RIVER Side Drive, Pompano Beach, PL 33062
(1 thicipal office address)
(Current mailing address)
8. MARKETING-WholesAle+ REXAI
(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: MARK W. HUGRES
Office Address: 8065 MIZNER LANE
BOCA BATOM , Florida 33433 SET
(City) (Zip code)
0. Registered agent's acceptance:
laving been named as registered agent and to accept service of process for the above stated corporation at the place
esignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I writer agree to comply with the provisions of all statutes relative to the proper and complete performance of my
uties, and I am familiar with and accept the obligations of my position as registered agent.
7-2-01 Barrens 7-9-01
(Registered agent's signature)
1. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this and the

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. Ivaines and business audi esses of officers and/of directors.	
A. DIRECTORS	
Chairman:	
Address:	-
Vice Chairman:	·
Address:	
Director: N. WAYNE HUGHES	
Address: BBI BOX 2260, Cliwon, ME, 04927	
Director:	
Address:	
D. OVERTORING	
B. OFFICERS	
President: N. WAYNE HUGHES	
Address: BBI BOX 2260 Clingon, ME 04927	
TALL.	-
Vice President: NONE	n
Address:	
Secretary: MARK W. HUGHES	
Address: 8065 MIZNER LANE BOCA RAYON, FL 33433	
reasurer: MARK W. HUGHES	
Address: 8065 MIZNER LANE BOCA BAOW, FL 33433	<u> </u>
	<u> </u>
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or director	ors.
3. / Mayor Mal 11-56	7-2-01
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)) <
4. NAYNE HUGHES - President Mast W. ffresh (Typed or printed name and capacity of person signing application)	es +
(13ber of brunce name and capacity of berson signing abbitcation)	TUBREURER



CORPORATE CHARTER

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that **ONE TEAM**, **CORP**. did on **June 1**, **2001** file in this office the original Articles of Incorporation; that said Articles are now on file and of record in the office of the Secretary of State of the State of Nevada, and further, that said Articles contain all the provisions required by the law of said State of Nevada.

IN WITNESS WHEREOF, I have hereunto and affixed the Great Seal of State, at my office in Carson City, Nevada, on June 4, 2001.



Secretary of State

Certification Clerk