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

CORPORATION(S) NAME

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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: I.C.E. Consultants U.S., Inc.	
(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:	
John W. Dubbs	
(Name of Person)	
Hinshaw & Culbertson	
(Firm/Company)	, ' -
222 North LaSalle Street, Suite 300	
(Address) $+ + + + + + + + + + + + + + + + + + +$	
Chicago, IL 60601	
(City/State and Zip code)	
TS Management	
For further information concerning this matter, please call:	
Tohn W. Dubb-	
at ( nt 5075	
(Name of Person) (Area Code & Daytime Telephone Number)	
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 & □ \$78.75 Filing Fee & □ \$87.50 Filing Fee,  Certificate of Status	

#### 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.	I.C.E. Consultants U.S., Inc.  (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.		
	(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4.	May 3, 1995 5. Perpetual	
	May 3, 1995  (Date of incorporation)  5. Perpetual (Duration: Year corp. will cease to exist or "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.	15 Madison Avenue, Toronto, Ontario Canada M5R 2S2	_
	(Principal office address)	
	15 Madison Avenue, Toronto, Ontario Canada M5R 2S2	
	(Current mailing address)	
8.	Telephone dating service	
	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	$\neg$
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	
		III
	Name. Or Solphannia San San San San San San San San San Sa	O
Of	Name: CT Corporation System  Fice Address: 1200 South Pine Island Road  Road  ORDE	
	Plantation ,Florida 33324	
	(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.

> Jeffrey R. Graves **Assistant Secretary**

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.

iered agent's signature)

### 12. Names and business addresses of officers and/or directors:

A. DIRE	CTORS
Chairman:	Evan Wright
Address: _	15 Madison Avenue, Toronto, Ontario Canada M5R 2S2
_	
Vice Chair	nan: N/A
Address:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
· .	
	N/A
Address:	And the second s
Dimenter:	N/A
Director:	N/A
Address:	
B. OFFICE	CRS
President:	Simon J. Lewis
Address:	7
Vice Presider	E N/A □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
Address:	DA 0
_	
Secretary:	Evan Wright
Address:	15 Madison Avenue, Toronto, Ontario Canada M5R 2S2
Treasurer:	Simon J. Lewis
Address:	15 Madison Avenue, Toronto, Ontario Canada M5R 2S2
<b>NOTE:</b> If no	cessary, you may attach an addendum to the application listing additional officers and/or directors.
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14	FLAN I WALLAT
	(Typed or printed name and capacity of person signing application)

File Number \_ 5832-263-6



## 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