

ACCOUNT NO.

072100000032

REFERENCE

410966

7268358

BK

AUTHORIZATION

COST LIMIT

ORDER DATE: December 18, 2001

ORDER TIME : 11:19 AM

ORDER NO. : 410966-010

CUSTOMER NO:

7268358

CUSTOMER:

Mr. Paul Kotik Mr. Paul Kotik 52 Rockledge Road

Newton, MA 02461

FOREIGN FILINGS

NAME:

KOKUA, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Norma Hull -- EXT# 1115

EXAMINER:

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

REGISTER A FO	SE WITH SECTION 60 OREIGN CORPORATION	07.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO ION TO TRANSACT BUSINESS IN THE STATE OF FLOREDA.	
1. KOKUA, INC			
(Name of corpo words or abbre	viations of like import in	word "INCORPORATED", "COMPANY", "CORPORATION" or a language as will clearly indicate that it is a corporation instead of a ontained in the name at present.)	
2. DELAWARE		3. 65-1154755 景丽 志	
(State or count	ry under the law of which	th it is incorporated) (FEI number, if applicable)	٠
4. APR	16, 2001	1 5. PERPETUAL	
(Da	te of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	
6	UPOH QU	UALIFICATION	
(Date first trans	acted business in Florida. (SEE	I. If corporation has not transacted business in Florida, insert "upon qualification.") E SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	
7. 898 0	MAHOGANY	WAY PLANTATION FL 33324	
		(Principal office address)	
8980	MAHOGANY		
		(Current mailing address)	
		ized in home state or country to be carried out in state of Florida)	المالح
(Purpose	(s) of corporation authoriz	ized in home state or country to be carried out in state of Florida) la registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	inis
(Purpose	(s) of corporation authoriz	ized in home state or country to be carried out in state of Florida) la registered agent: (P.O. Box or Mail Drop Box NOT acceptable) rice Company	S
9. Name and str	(s) of corporation authorize reet address of Florida Corporation Servi	ized in home state or country to be carried out in state of Florida) In registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Price Company	SIG
9. Name and str	(s) of corporation authorize reet address of Florida Corporation Servi	ized in home state or country to be carried out in state of Florida) la registered agent: (P.O. Box or Mail Drop Box NOT acceptable) rice Company	
(Purpose 9. Name and str Name: Office Address: 10. Registered a Having been nan designated in thi further agree to	ceet address of Florida Corporation Servi 1201 Hays Street Tallahassee (City) agent's acceptance: ned as registered agents s application, I hereby comply with the provise	ized in home state or country to be carried out in state of Florida) la registered agent: (P.O. Box or Mail Drop Box NOT acceptable) rice Company Florida 32301	Sign
(Purpose 9. Name and str Name: Office Address: 10. Registered a Having been nandesignated in this further agree to duties, and I am	ceet address of Florida Corporation Servi 1201 Hays Street Tallahassee (City) agent's acceptance: ned as registered agents s application, I hereby comply with the provise	la registered agent: (P.O. Box or Mail Drop Box NOT acceptable) rice Company , Florida 32301. (Zip code) nt and to accept service of process for the above stated corporation at the place y accept the appointment as registered agent and agree to act in this capacity. I sions of all statutes relative to the proper and complete performance of my tept the obligations of my position as registered agent.	, L

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. DIREC	TORS	
Chairman: _	PAUL KOTIK	
Address:	8980 MAHOGANY WAY	
	PLANTATION FL 33324	100
Vice Chairm	an:	A CONTRACTOR OF THE PARTY OF TH
Address:	<u>-</u>	
	•	70 10
Director:	GILA KOTIK	10 to 15
Address:	8980 MAHOGANY WAY	<u> </u>
	PLANTATION FL 33324	
Director:		-
riddross.		
B. OFFIC	ERS	
President: _	PAUL KOTIK	
	PAW YMADGHAM OF PE	·
	PLANTAMON FL 33324	
Vice Preside	ent:	
		•
Addiess		
Secretary: _	PAUL KOTIK	-
Address:	8980 MAHOGANY WAY PLANTATION	N FL 33324
Treasurer:	8980 MAHOGANY WAY PLANTATION PAUL KOTIK 8980 MAHOGANY WA	Y PLANTATION FL 3332
Address:		
NOTE: If	necessary, you may attach an addendum to the application listing additional offic	ers and/or directors.
13	In the	
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of	of the application)
14	PAUL KOTIK	
	(Typed or printed name and capacity of person signing application)	

State of Delaware Office of the Secretary of State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "KOKUA, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTEENTH DAY OF DECEMBER, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

Harriet Smith Windson, Secretary of State

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AUTHENTICATION: 1512931

DATE: 12-18-01