# F0200000810

#### TRANSMITTAL LETTER

<b>FO:</b> Registration Sec Division of Corp				
		Mitery are		
SUBJECT:	Perfect waw (Name of corporation	on - must include suffix)	***	
Dear Sir or Madam:	_			
The enclosed "Applicati" "Certificate of Existence to transact business in F	ion by Foreign Corporation for 2", and check are submitted to 1 lorida.	Authorization to Transa egister the above referen	ct Business in Florida", need foreign corporation	
Please return all corresp	ondence concerning this matter			
	Regina PF (Name of	046		
	(Name of	Person)		
	Perfect Way (Firm Co	'orpovation		
	• • •	<u> </u>		
	2 Stage Co	iach Run		
	Fash Rice	swich, NJ	r Rain	
<u> </u>	(City/State	and Zip code)	0 0 0 0 0	-
			0000490083 -02/11/020109	38(
For further information	concerning this matter, please	call:	+****78.75 **	****78.75
Regina Pfor	at ( <u>732</u>	, 254.3929	)	
QName of Perso	on) (Area	Code & Daytime Teleph	none Number)	
STREET ADDRESS:	·	_MAILING ADDRES  Registration Section	<b>SS:</b>	
Registration Section Division of Corporation	18	Division of Corporati	ons	
409 E. Gaines St.	••	P.O. Box 6327	<b>02</b> TAE	
Tallahassee, FL 32399		Tallahassee, FL 3231		
Enclosed is a check for	the following amount:		ETAR NASS	<b>三</b>
☐ \$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status Certified Gopy &	in D

10tu 2/1

### 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.

	xway Corp				_		
words or abbre	viations of like imp	le the word "INCO port in language as t so contained in th	will clearly indica	te that it is a corpo	ORPORATION" or oration instead of a	<u> </u>	<u> </u>
2. Dela	ware , u	> <b>\( \)</b> which it is incorpor	3	52.21	75925		
(State or country							
4	5.28.	1999	5	Perpetu	vill cease to exist or		
(Da	te of incorporation	)	(Dura	tion: Year corp. v	vill cease to exist or	r "perpetua	ul")
6	Upon que	wistation					
(Date first trans	_ •	(SEE SECTIONS	607.1501, 607.1	502 and 817.155, 1			
7	2 59	eige Coaci	1 Run	E. Bru	nswick,	nt c	018816
		(2 2227)	orizon address)		•		
·			some_				
	-	(Current ma	ailing address)				
8	consul.	tine				*	
(Purpose	(s) of corporation a	uthorized in home	state or country to	be carried out in	state of Florida)		
9. Name and <u>str</u>	reet address of F	lorida registerec	l agent: (P.O. l	Box or Mail Dro	p Box <u>NOT</u> accep	ptápie) z	3
Name:	Robert	Daisley			44 - 5, .		
Office Address:	3201	Daisley West Ku Ya Ity)	<u>uights</u> au	K	፡ ፡ •	35 -	
	Taw	una .	J	Florido 23	b11	三分 玉	
	(C	ity)	· · · · · · · · · · · · · · · · · · ·	(Zip co	ode)		o ·
					,	ST S	ა <b>ი</b>
10. Kegistered a Having been nan	igent's acceptan	ce: . <i>agent and to acc</i>	ent service of n	rocass for the al	bove stated corpor	4*	a7 #
uesignuieu in ini	s appucation, 1 n	ereby accept the	appointment as	registered agen	it and acree to ac	t in thic c	anacity I
uriner ugree to t	comply with the p	provisions of all s	tatutes relative	to the proper as	id complete perfo	rmance o	of my
iuies, unu 1 um	jamuiar wun an	d accept the oblig	ations of my po	sition as registe	red agent.		
	Popular 1	U A	-1: -				
-		(Registered	agent's signature		<del></del>		. de 💄 -

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. DIRECTORS Chairman: Kak E. andersen Stage Coach Run East Brunswick nJ 08816 Knights Blvd. west Address: Tampa, Rochlis 58 Dexter Address: Malden, MA 02148 Director: **B. OFFICERS** President: Karl E. andersen Stage Coach Run Bast Brunswick UJ 08816 Vice President: Address: Secretary: \_ Address: \_ Treasurer: Address: NOTE: If necessary, 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) Karl E. andersen - President 14. (Typed or printed name and capacity of person signing application)

## Delaware

PAGE 1

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PERFECTWAY CORPORATION" 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 THIRTIETH DAY OF JANUARY, A.D. 2002.

O2 FEB II PH 8: 38
SECRETARY OF STATE



Warriet Smith Windson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1586957

DATE: 01-30-02

3047740 8300

020056511