# CT C PORATIO 200000 21 42 CORPORATIO (S) NAME 200000 21 42

MCD (USA) Corporation	*
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W. H.	
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(x) Profit () Amendment	() Merger
() Nonprofit	() Merger 23 77 78 78 78 78 78 78 78 78 78 78 78 78
(x) Foreign () Dissolution/Withdrawa	al () Mark
() Reinstatement	
() Limited Partnership () Annual Report () LLC () Name Registration	() Other
· · · · · · · · · · · · · · · · · · ·	() Change of RA
() Fictitious Name	() 000
(x) Certified Copy () Photocopies	() CUS
() Call When Ready () Call If Problem	() After 4:30
(x) Walk In () Will Wait	• •
() Mail Out	(x) Pick Up
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Name 4/30/02	Order#: 5310703
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Verifier	_045 205 0501002050
W.P. Verifier	*****78.75 *****78.7 Amount: \$

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

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

		72 Jan 22 - 1	
IN COMPLIANC	E WITH SECTION 607.1503, FLORIDA STAT	TUTES, THE FOLLOWING ISSUEMITTED TO	
REGISTER A FO	DREIGN CORPORATION TO TRANSACT BUS	SINESS IN THE STATE OF ELORIDAD	
	and the second s		
iM	CD (USA) Corporation	WOOD OF A TION OF THE PARTY OF	
(Name of corpo	oration; must include the word "INCORPORATED"	", "COMPANY", "CORPORATION OF	
words or abbre	viations of like import in language as will clearly in	dicate that it is a corporation instead of a	
natural person o	or partnership if not so contained in the name at pre-	sent.)	
	-1	Pending	
		(FEI number, if applicable)	<del></del> ;
(State or country	y under the law of which it is incorporated)	(TEI Humber, it applicable)	
4 M	arch 28, 2002 5. <u>I</u>	Pernetual	
· (Da	te of incorporation) (I	Perpetual Ouration: Year cosp. will cease to exist or "perpetual")	<del>,</del> .
(54	(-		
6. U	pon Qualification		
(Date first trans	acted business in Florida. If corporation has not tra	nsacted business in Florida, insert "upon qualification."	")
	(SEE SECTIONS 607.1501, 60	)7.1502 and 817.155, F.S.)	
	e w 1701 Budaloo71 Avec Sud#	a 1207 Miami FT. 33131	
7. c/o Danie	1 Isaia, 1101 Brickell Ave., Suit (Principal office address	e 12029 litamity III ooko-	_
	(Principal office address	2),	
as	above		
	(Current mailing address	s)	
. To angree	in any lawful act or activity for	or which corporations may be organize	ed under
		try to be carried out in state of Florida) the General	
(Purpose	(s) of corporation authorized in nome state or count	Law of De	
9 Name and st	reet address of Florida registered agent: (P		24,426,
J. Ivame and <u>se</u>	rect address of a forest register of		
Name:	CT Corporation System		
			_
Office Address:	1201 South Pine Island Road		
			•
	Plantation	, Florida <u>33324</u> (Zip code)	- =
	(City)	(Zip code)	
10. Registered	agent's acceptance:	•	
Having been na	med as registered agent and to accept service	of process for the above stated corporation at th	e place
designated in th	is application, I hereby accept the appointmen	nt as registered agent and agree to act in this cap	pacity. I
further agree to	comply with the provisions of all statutes rela	ative to the proper and complete performance of	nıy
duties, and I and	familiar with and accept the obligations of n	ny position as registered agent.	
		4	
	- 1 1	AVARD GWISDATT	
		Assistant Vice President	
		<i>y</i>	
	(Registered agent's signa	ature) &	

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 Nomes and business 22	18 N
12. Names and business addresses of officers and/or directors:	FILED TO SERVE
A. DIRECTORS	SSET OF P
Chairman: See attachment	<del></del>
Address:	027 2
	<u> </u>
Vice Chairman:	
Address:	
	• •
Director:	
Address:	
Director	<del></del>
Director:	
Address:	
B. OFFICERS	
President: See attachment	
Address:	
Vice President:	,
Address:	
Secretary:	
reasurer:	
Address:	
NOTE: If necessary you med and had	
NOTE: If necessary, you may areach an addendum to the application listing	g additional officers and/or directors.
(Signarure of Chairman, Vice Chairman, or any officer liste	ed in number 12 of the application
4. Marie-Laurence Mora, Director, President and Treas	
(Typed or printed name and capacity of person sign	ing application)

#### ATTACHMENT TO APPLICATION

#### A. DIRECTORS

Name:

Marie-Laurence Mora

Address:

22, rue Maurice Cerveaux - B.P. 138

51205 Epernay

France

Name:

François-Xavier Mora

Address:

22, rue Maurice Cerveaux - B.P. 138

51205 Epernay

France

Name:

Daniel Isaia

Address:

1011 Brickell Ave., Unit 1202

Miami, FL 33131

#### **B. OFFICERS**

Name:

Marie-Laurence Mora

Title:

President and Treasurer

Address:

See above

Name:

François-Xavier Mora

Title:

**Executive Vice-President and Secretary** 

Address:

See above

Name:

Daniel Isaia

Title:

Vice-President and Assistant Secretary

Address:

See above

Name:

Alicia Constain

Title:

Vice-President and Assistant Treasurer

Address:

1011 Brickell Ave., Unit 1202

Miami, FL 33131

Name: Title: Yves de Launay Vice-President

Address:

1150 San Pedro Ave. Miami, FL 33156 FILED 122

RAPR 30 PM 1: 22

SECKETARY OF STATE ORDER

TALLAHASSEE, FLORID

# Delaware

### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MCD (USA) 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 TWELFTH DAY OF APRIL, A.D. 2002.

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



Darriet Smith Windson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 1720477

DATE: 04-12-02

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