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April 25, 2002

#### CORPORATION NAME (S) AND DOCUMENT NUMBER,(S):

Pura Vida Inc.

Filing Evidence  ☑ Plain/Confirmation Copy	y		Type of Document  Certificate of Status
□ Certified Copy			□ Certificate of Good Standing
			□ Articles Only
Retrieval Request  Photocopy			<ul> <li>□ All Charter Documents to Include Articles &amp; Amendments</li> <li>□ Fictitious Name Certificate</li> </ul>
□ Certified Copy		(4)	□ Other 4000053506440 -04/26/0201001013
NEW FILINGS		AMENDMENTS	******70.00 ******70.00
Profit		Amendment	
Non Profit		Resignation of RA	. Officer/Director
Limited Liability		Change of Registe	red Agent
Domestication		Dissolution/Withd	rawal
Other		Merger	*
OTHER FILINGS		REGISTRATION	/QUALIFICATION
Annual Reports	х	Foreign	
Fictitious Name		Limited Liability	
Name Reservation		Reinstatement	67 :7 Ny cz
Reinstatement		Trademark	0 0 52 20 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
		Other	SEO ENVE



#### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 26, 2002

**UCC FILING & SEARCH** 

TALLAHASSEE, FL

SUBJECT: PURA VIDA INC. Ref. Number: W02000011996





We have received your document for PURA VIDA INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$70.00 payment.,

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Corporate Specialist

Letter Number: 202A00025618



#### RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned Thomas P. Bock do hereby certify (Name)
that this Resolution of the Board of Directors of Puna Vida Inc.
(Corporate Name)
a corporation duly organized and existing under the laws of the State of Delawane,
was duly adopted on APRIC 11 2002
Be it resolved, that PURA VIDA INE
organized and existing in the State of
Dated: 5/21/02
Signature of either Chairman, Vice Chairman or any officer Thomas P. Bock
Type or print name

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING ISSUBMIT REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" words or abbreviations of like import in language as will clearly indicate that it is a corporation instead natural person or partnership if not so contained in the name at present.) (State or country under the law of which it is incorporated) UPUN 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.) TAUN ANT OPENA TIONS
poration 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 Office Address: Y123 Apple Blossom No

Lutl , Florida 33578

(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.

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	a garage
Chairman: STEP HEN F. PANICER	
Address: 30 WOUDLINGER RD	
MILTURO MA 51757	SECON TO
Vice Chairman: Thomas P. Bock	ET 3 F
Address: 4123 Apple Blasson RD	SS 3 E
LUTZ FZ 335TF	THE P
Director: STEPITEN T. PARICER	TORBUTE 55
Address: 30 WUUDNIAGE ND	
MILFORD MA 01757	
Director:	
Address:	
B. OFFICERS	
President: STEPHEN F. PARICER	
Address: 30 WOUD RIGGE RD  MILFIND MA 01757	
Vice President: Thomas P. Bock	
	<del> </del>
Address: 4123 Apple Blosson RD	
LUTZ TO 335TF	<u></u>
Secretary: CITNISTING M. BOCK	
Address: 4123 Apple BLOSSON RO LUTZ	12 33578
Treasurer: STEPITEN T. PANICEN	
Address: 30 WUUN AINGE RO. MICFURD,	NA 01757
NOTE: If necessary, you may attach an addendum to the application listing additional officers at	nd/or directors
11/26	AU OF GITOGOTS.
13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the	application)
14. Thomas P. Bock	
(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 "PURA VIDA, 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 ELEVENTH DAY OF APRIL, A.D. 2002.

OZ NAY 23 PN 2: 45
SECRETARY GESTATE



Warriet Smith Windson Secretary of State

AUTHENTICATION: 1718104

DATE: 04-11-02

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