

REFERENCE : 570750

121767A

AUTHORIZATION

COST LIMIT

ORDER DATE T May 8, 2002

ORDER TIME: 2:39 PM

ORDER NO. : 570750-005

CUSTOMER NO: 121767A

CUSTOMER: Ms. Maria Elena Dieguez

Karp & Genauer, P.a.

Suite 1202

2 Alhambra Plaza

Coral Gables, FL 33134

FOREIGN FILINGS

SURFSIDE INC.

000005493100---1

(TYPE: CO) XXXX QUALIFICATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Deborah Schroder -- EXT# 1118

EXAMINER:



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 8, 2002

DEBORAH SCHRODER CSC TALLAHASSEE, FL

SUBJECT: SURFSIDE, INC. Ref. Number: W02000013323



We have received your document for SURFSIDE, INC. and the authorization to debit your account in the amount of \$78.75. However, the document has not been filed and is being returned for the following:

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: 902A00029031



FLORIDA DEPARTMENT OF STATE

OZ MM S. SEE, FLORIDA FILED W. S. TATE F

RESOLUTION OF BOARD OF DIRECTORS

I, the undersigned	JEAN CHRISTOPHER PELLE	TIER	do hereby certify
that this Resolution of t	the Board of Directors of	SURFSIDE, INC.	- ·
a corporation duly org	ganized and existing under the	e laws of the State of	
was duly adopted on	May 7		-
Resolved, that	SURFSIDE, INC.		,organized
and existing in the SX	NKKMK British Virgin Isla E PROPERTIES, INC.	ands, hereby adopts th	ie .
for use in Florida.			
Dated: MAY 7, 2002	/	1	Λ
1/19 519(1/95)	Signature of at Jeast on Jean Christopher	director Pelletier	Deigned -

Received Time May. 9 11:56AMP.O. Box 6327. Tallahasses, Florida 32314

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. SURFSIDE	E, INC. d/b/a Surfside Propert:	ies	s, Inc.	<u> </u>
			ED", "COMPANY", "CORPORATION" or	200
	eviations of like import in language as will cle or partnership if not so contained in the name		y indicate that it is a corporation instead of a	A.
natarar person	or particising it not so contained in the inter-	c ai	prosent.)	
2. British	Virgin Islands	_3.	72-1520893	
(State or countr	ry under the law of which it is incorporated)		(FEI number, if applicable)	
4. <u>February</u>	2, 1993	5.	-Perpetual	
	ite of incorporation)	-	<u>-Perpetual</u> (Duration: Year corp. will cease to exist or "perpe	tual")
6. Upon qua	lification			
		not	transacted business in Florida, insert "upon qualific	ation.")
	(SEE SECTIONS 607.1	501	, 607.1502 and 817.155, F.S.)	
7 c/o Mendiv	ve & Assoc Inc 250 Catalo	mi	a Avenue, #705, Coral Gables, F1	3313/
, ,	(Principal office			
c/ Mendive	& Accor Inc. 250 Catalan	٠.	4705 0 1 0 1 1	
C) LICITATIO	Current mailing	nddi	Avenue, #705, Coral Gables, FL (33134
	(,	
	1			
	and manage real estate (s) of corporation authorized in home state or	r coi	emtry to be carried out in state of Florida)	
(x arpose	(b) or oorboration attended in the time of the		may to be during our in paris of 1 102244)	
9. Name and <u>st</u>	<u>reet address</u> of Florida registered agen	t:	(P.O. Box or Mail Drop Box NOT acceptable)	
Name:	c/o Alhambra Registered Age	nts	s, Inc.	
2 (41224)			=	
Office Address:	2 Alhambra Plaza, Suite 120	2		
	Coral Gables		Florida 33134	
	(City)		Florida 33134 (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.

ALHAMBRA REGISTERED AGENTS, INC.

Martin J. Genauer (Registered agent's signature)

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		-		÷	- 4	S. 73	~
Chairman:	-	- · 			<u> </u>	19 Z	
Address:						F	o E
							
Vice Chairman:						000	20
Address:						y	
						<u></u>	
Director: Jean Christopher Pelle	tier						
Address: <u>c/o Mendive & Assoc.</u>	Inc., 250	Catalonia	Avenue,	<i>‡</i> 705,	Coral	Gables,	<u>F1 3313</u> 4
Director:							
Address:				- :			
B. OFFICERS President: Jean Christopher Pelle Address: c/o Mendive & Assoc.,							FL 33134
Vice President:							
Address:						·····	
Secretary:Jean Christopher Pelle	tier	<u> </u>					
Address: c/o Mendive & Assoc.,		Cat <u>al</u> onia	Avenue,	#705 ,	Coral	Gables,	FL 33134
Treasurer:		 -	territorio de la constanta de				
Address: NOTE: If necessary, you may attach an ad	dendum to the	application li	sting additio	nal offic	ers and/	or directors	
13. (Signature of Chairman, Vi	ce Chairman,	or any officer	listed in nur	nber 12	of the ap	plication)	
JEAN CHRISTOPHER PELLETIER							.
(Typed or printed r	name and capac	city of person	signing app	ucation)			

