# F02000004406

TO: Registration Sec Division of Cor					
SUBJECT:	Name of corpo	LSSOVILS To ration - must include suff	UCD UX)	rporuted	<u>-</u>
Dear Sir or Madam:					
"Certificate of Existence to transact business in F	ondence concerning this m	I to register the above refeatter to the following:			
	(Nam	ne of Person)	•	38 ADA	e 3.
<u> May</u>	ina Accessori		nat	eil	Ala
		(Company)			
6.0. ROX 8	1001-6 stra	Address)	L_# !#	<u>'''=1675775=1</u> ******78_75	1008-002
Bellingh	am, Washin	/	-5		*****78.75 
For further information of	concerning this matter, plea	ase call:			
Name of Person	at ( <u>36</u>	rea Code & Daytime Tele			, <u>.</u>
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399		MAILING ADDRI Registration Section Division of Corpora P.O. Box 6327 Tallahassee, FL 32	n ations		
Enclosed is a check for the	he following amount:				
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	: 0	\$87.50 Filing Fee, Certificate of Stat	us &

Certified Copy

#### 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. HULLSSOVIRS. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) (Date of incorporation)

5. Ply pl+ual
(Duration: Year corp. will cease to exist or "perpetual") Upon 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.) Dennis Strut-Jacksonvill
(Principal office address) (Current mailing address) Purpose(s) of corporation 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: 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.

(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
Chairman: Tina Devrils
Address: P.O. Box & Bellingham, WA 98225
Vice Chairman: Pam Civelnman
Address: 1813 Dennis Street Jacksonville, FL 32204
Director: Clerge Cunningham
Address: 1718 Marin Drive, Suite 3 West Vangouver,
British Columbia VIV 173 (canada) -
Director:
Address:Address:
SEE OF A CO
B. OFFICERS
President: Tina De Vvies
Address: P.O. Box 8 - Bellingham, WA 98225
Vice President: Pam Crunwan
Address: 1813 Dennis Street Jacksonville, FL 32204
Secretary: Pam arunwan
Address: 1813 Dennis Street-Jacksonville, FL 32204
Treasurer: Paw Cyllnman
Address: 1813 Dennis Street-Jacksonville, FL 32204
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)
14 Tiva Delvie Chamman, or any officer fished in number 12 of the application)
(Typed or printed name and capacity of person signing application)

## STATE of WASHINGTON



## SECRETARY of STATE

I, SAM REED, Secretary of State of the State of Washington and custodian of its seal,

hereby issue this

### CERTIFICATE OF EXISTENCE/AUTHORIZATION

**OF** 

MARINA ACCESSORIES, INC.

02 AUG 27 AM IO: 38
SECRETARY OF STATE
TAIL AHASSEE, FLORIDA

I FURTHER CERTIFY that the records on file in this office show that the above named profit corporation was formed under the laws of the State of Washington and was issued a Certificate of Incorporation in Washington on October 23, 1998.

I FURTHER CERTIFY that as of the date of this certificate, no Articles of Dissolution have been filed, and that the corporation is duly authorized to transact business in the corporate form in the State of Washington.



Date: August 13, 2002

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Sam Reed, Secretary of State