F02000004698

TRANSMITTAL LETTER

TO: Registration Division of	on Section f Corporations	
SUBJECT:	ESOX, Inc.	
	(Name of corporation - must include suffix)	
Dear Sir or Madam:	·	
The enclosed "Appl "Certificate of Exist to transact business	lication by Foreign Corporation for Authorization to Transact Business in Florida", tence", and check are submitted to register the above referenced foreign corporation in Florida.	
Please return all corn	respondence concerning this matter to the following:	
	JAMES M. KASMIRSKI	8
	(Name of Person)	SEF.
	ESOX, Inc.	
	(Firm/Company)	모르
	5533 HUGO ROAD	<u>2</u>
	(Address)	ည
	WHITE BEAR LAKE, MN 55110	-
	(City/State and Zip code)	
For further information	on concerning this matter, please call: -08/29/0201026 ******87.50 ***	002
Jim Kasmi (Name of Per	rson) at (651) 271-9306 (Area Code & Daytime Telephone Number)	
STREET ADDRESS:	W02-65699	
Registration Section	Registration Costinu	
Division of Corporatio 409 E. Gaines St.	Division of Corporations	
Tallahassee, FL 32399	P.O. Box 6327 Tallahassee, FL 32314	-
Enclosed is a check for	r the following amount:	
□ \$70.00 Filing Fee	S78.75 Filing Fee & S78.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy	



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

August 30, 2002

JAMES M. KASMIRSKI ESOX, INC. 5533 HUGO RD. WHITE BEAR LAKE, MN 55110

SUBJECT: ESOX. INC.

Ref. Number: W02000025299

We have received your document for ESOX, INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

The certificate you provided is not an original. Please send the original certificate

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

If you have any questions concerning the filing of your document, please call (850) 245-6025.

Letter Number: 002A00050654

Trevor Brumbley **Document Specialist**

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.

1ESOX, Inc.	
(Name of corporation; must include the word "INCORPOR words or abbreviations of like import in language as will cl natural person or partnership if not so contained in the nam	learly indicate that it is a cornoration instead of a
2. MINJESOTA (State or country under the law of which it is incorporated)	_34 -1784154
46/15/94	5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUALIFI	CATION CATION
(Date first transacted business in Florida. If corporation has (SEE SECTIONS 607.1	s not transacted business in Florida, insert "upon qualification.") 1501, 607.1502 and 817.155, F.S.)
7. <u>5533 HUGO R</u>	DOAD WHITE BEAR LAKE, MN 55110 address)
FC33 1144 - 0	address)
	address) WHITE BEAR LAKE, MN 55110 address)
(Current mailing	address)
8. MORTGAGE LOAN ORIG	
(Purpose(s) of corporation authorized in home state or	r country to be carried out in state of Florida)
9. Name and <u>street address</u> of Florida registered agen	at: (P.O. Box or Mail Drop Box NOT acceptable)
Name: CHERYLAND C. KASMIRSK	Account of the second of the s
Office Address: 8035 GILLETTE CT	
ORLANDO	, Florida 328/9
(City)	(Zip code) グネ の ラシ
10. Registered agent's acceptance:	
Having been named as registered agent and to accept se	rvice of process for the above stated corporation at the place
tesignatea in this application, I hereby accept the appoi	ntment as registered agent and agree to get in this garage.
uriner agree to comply with the provisions of all statute luties, and I am familiar with and acc e pt the obligations	es relative to the proper and complete performance of my
()	s of my position us registerea agent.
Memush	_
(Registered agent's	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.

A. DIRECT	b.	
Chairman:	JAMES M. KASMIRSKI	
ddress:	\$ 5533 HUGO ROAD	
	WHITE BEAR LAKE, MN 55110	
ice Chairmai	n:	<u>·</u>
idress:		
		<u> </u>
		 -
sident:	JAMES M. KASMIRSKI	
sident:	JAMES M. KASMIRSKI 5533 HUGO ROAD	
sident:	JAMES M. KASMIRSKI 5533 HUGO ROAD WHITE BEAR LAKE, MN 55110	
sident:	JAMES M. KASMIRSKI 5533 HUGO ROAD WHITE BEAR LAKE, MN 55110 STR. 55	A
sident:	JAMES M. KASMIRSKI 5533 HUGO ROAD WHITE BEAR LAKE, MN 55110 EFF PR	A
sident:	JAMES M. KASMIRSKI 5533 HUGO ROAD WHITE BEAR LAKE, MN 55110 REP PM D ORI	AVO
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state of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

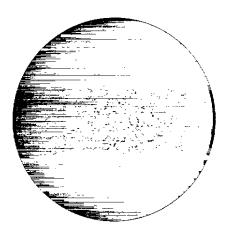
I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: ESOX, INC.

Date Formed: 06/15/1994

Chapter Governed By: 302A

This certificate has been issued on 08/20/02.



Mary Kiffmeyer Secretary of State.