F0200000004782

TO: Registration Section Division of Corporations
SUBJECT: Marlin Management Inc. (Name of corporation - must include suffix)
(Name of corporation - must include suffix)
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following: Mar K Murnane
(Name of Person)
Macla Maracament To 600007659456
-09/11/0201028001 ******87.50 ******87.50 (Firm/Company)
1226 SW. 54+65+
(Address)
Cape Coral, FL 339/4 (City/State and Zip code)
(City/State and Zip code)
For further information concerning this matter, please call:
Mark Museum 11779 May 119-119
(Name of Person) (Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations Division of Corporations Division of Corporations P.O. Box 6327
Tallahassee, FL 32399 Tallahassee, FL 32314
Enclosed is a check for the following amount:
System of Status System of System of Status System of



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

September 12, 2002

MARK MURNANE MARLIN MANAGEMENT, INC. 1226 S.W. 54TH STREET CAPE CORAL, FL 33914

SUBJECT: MARLIN MANAGEMENT, INC.

Ref. Number: W02000026509

We have received your document for MARLIN MANAGEMENT, 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:

Please note that we have ALSO RETAINED your \$87.50 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: 102A00052295

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)	•
I, the undersigned Mark Murnant, do hereby cert	į
(Name) , do hereby certification	if
that this Resolution of the Board of Directors of	
Marlin Management, Inc. (Corporate Name)	_1_
a corporation duly organized and existing under the laws of the State of	
was duly adopted on September 19 2003	
Be it resolved, that flank flank general In	•
(Cerporate Name)	•
organized and existing in the State of // nncsofa, hereby adopts the name	
Marlin Management of Minnesota, Inc. for use in Florida.	
Dated: 9-19-02	
Jan	
Signature of either Chairman, Vice Chairman or any officer	

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

Type or print name

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607,1503, FLORIDA STATUTES, THE BOX OF	
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.	
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words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a final natural person or partnership if not so contained in the name at present	
natural person or partnership if not so contained in the name at present.)	
2. Innesata	
(State or country under the law of which it is income.)	
To homoer, it applicables	
4. 3-27-95 (Date of incorporation) 5. Perpara 5	
(Duration: Year corp. will assess	
O. Anon (V. /L)	
(Date first transacted business in Florida. If corporation has not transacted business in Florida.	
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	
7. 1226-5W 54th St. Capolara 1 Fl 33914	
(Principal office address)	
	=
8. Real to take Invostment (Purpose(s) of corporation authorized in Invostment	
- Lolain Louis Time	
(Purpose(s) of corporation authorized in home state or country to be carried out in any	·
respectation authorized in nome 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 Deep Research	* <u></u>
9. Name and street address of Florida registered agent: (P.O. Box or Mail Deep Research	
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Mark Marnant	3 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
9. Name and street address of Florida registered agent: (P.O. Box or Mail Deep Research	
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Mark Marnant Office Address: 1336 5 11 5 4 74 54	
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Mark Marnant Office Address: 1336 5 11 5 4 74 54	
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Mark Marnant Office Address: 1336 5 10 5 4 74 5 7 (City) (Zip code)	
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Mark	
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Mark Mark Therman Office Address: 1336 5 W 5 4 7 4 5 4 (City) (Zip code) 10. Registered agent's acceptance: Having been named as registered agent.	
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Mark	
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Mark	7
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Mark	
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Mark	7
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Mark	
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Mark	

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.

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s and/or directors	
—	34 V
	the application)

state of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

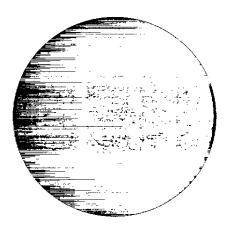
I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the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

Name: Marlin Management, Inc.

Date Formed: 03/27/1995

Chapter Governed By: 302A

This certificate has been issued on 07/24/02.



Mary Kiffmeyer Secretary of State.