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TO: Registration Section Division of Corporations	
SUBJECT: SCALE-MART Copporation (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.	
Tropel S. Yours	1234 168018 *****78.75
SCALE-MART Corporation	
(Firm/Company)	_ `
2829 Lyva Trail	
Solf Breeze, FL 32563	02 SEP
(City/State and Zip code)	P 2:
For further information concerning this matter, please call:	7 AM 9: 5
Kobert Young at (850) 916 0399	<u> </u>
(Name of Person) / (Area Code & Daytime Telephone Number)	
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following amount:	
□ \$70.00 Filing Fee \$\ \$78.75 Filing Fee & □ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy Certified Copy	s&) MV

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.	
SCALE-MART CORPORATION	
(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 matured present or partnership if not so contained in the name at present.)	
2. State or country under the law of which it is incorporated) 3. 03 - 0435016 (FEI number, if applicable)	
4. APRIL 29, 2002 (Date of incorporation) 5. Perpo tual (Duration: Year corp. will cease to exist or "perpetual")	
6. Open Subject 1000 (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.)	
7. 2829 Lynx TRAIL GUIF Breeze, FL 32563 (Principal office address)	·
2829 LYNX TRAIL, GUIF BREEZE, FL 32563 (Current mailing address)	.
8. To Engage IN Any Law Ful Activity For Corporation's Under Field (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	SARO LAU
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	FILED 27 AM 9:
Office Address: 2829 Lynx TRAIL Gulf Breeze, Florida 32563 (City) (Zip code)	<u>55</u>
(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 particular designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacitative agree to comply with the provisions of all statutes relative to the proper and complete performance of maduties, 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 applicate the Department of State, by the Secretary of State or other official having custody of corporate records in the juris	ation to diction

under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS Chairman: Kobert G. YOUNG
1670 Liver TRACE CULF BLOOM PL. Seson
Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
<u>.</u>
B. OFFICERS
President: Kobert & Young Address: 2829 Lynx TRAIL, Gulf Breeze, FL 32563
Address: <u>L829 Lynx TRAIL, Gulf Breete, PC Sont Breete, PC Son</u>
Vice President: Robert B. Young
Vice President: Kabert B. Yuvig Address: 9 The Grove, CoolRoe Meadows, Ballincotto, 70.
Address: TRO/AND
Secretary: Robert G. Young
Address:
Treasurer:ANBelique AA/Jerenk
Address:3131 Louve Dr. , Alt. B. Gulf Breeze, FL 32
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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
Chairman
14. (Typed or printed name and capacity of person signing application)



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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SCALE-MART CORPORATION" 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 SIXTH DAY OF SEPTEMBER, A.D. 2002.



Warriet Smith Windson, Secretary of State

AUTHENTICATION: 1970575

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