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<i>.</i>		پيس	
TO: Registration Section			•
Division of Corporations		FO 50 1	
SUBJECT: Mid Atlantic Cap (Name of corp	Hal Managemen	+ TOC. M. S. C.	.\ <i>O</i>
(Name of cor	poration - must include suffix)		
		100	<b>)</b> .
Dear Sir or Madam:			۷
The enclosed "Application by Foreign Corporation Corporation of Existence", and check are submitted to transact business in Florida.	on for Authorization to Transacted to register the above referen	t Business in Florida", Fig.	
Please return all correspondence concerning this	matter to the following:		
TID D			
John Delew			<u>.</u> =*
(Na	ame of Person)		
MidAtlantic CEpit	tal Management	Inc.	
(Fi	irm/Company)	- 10/04/02-01022-01022-01	= =
John DePew (No MidA Hantic Capit (Fi 10405 Braden  Bradenton, FL (City)	Run	*****70.00 ******70	i.00
	(Address)	,	- Province on
Badenton FL"	74207	. y 	; · . <del>-</del>
(City	/State and Zip code)	taring the second of the secon	e fifting
	1		
For further information concerning this matter, p	please call:		
-/ DD	مارا سرس سارد	~~~	^
John DePew at (2) (Name of Person)	741 ) 158-513	1 de	
(Name of Person)	(Area Code & Daytime Telepho	one Number)	
STREET ADDRESS:	MAILING ADDRESS	<b>S:</b>	- <u>-</u>
Registration Section	Registration Section		
Division of Corporations	Division of Corporation	ons	
409 E. Gaines St.	P.O. Box 6327	4	
Tallahassee, FL 32399	Tallahassee, FL 3231	<b>+</b>	
Enclosed is a check for the following amount:			
S \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of State		☐ \$87.50 Filing Fee, Certificate of Status &	: = .

Certified Copy

#### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

IN COMPLIAN REGISTER A F	CE WITH SECTION OREIGN CORPORA	607.1503, FLORID TION TO TRANSA	A STATUTES, CT BUSINESS	THE FOLLOWING . IN THE STATE OF I	IS SUBMITTED TO FLORIDA	)
1 Mid	Atlantic C	apital W	anasa me	t Tai		<u> </u>
words or abbre	poration; must include the eviations of like important or partnership if not so	ne word "INCORPOR in language as will cl	ATED", "COMI early indicate tha	'ΑΝΥ". "CORPOR ΔΤ	TION" or the stead of a line of the stead of	The state of the s
2. <u>Vi(q</u>	Inia ry under the law of whi		_3	<u> </u>	THE CO	
(State or count	ry under the law of whi	ch it is incorporated)		(FEI number, if app	plicable)	0.
4	gust 18 19 atte of incorporation)	793	5	Perpetual		
(Da	ate of incorporation)		(Duration:	Yéar corp. will cease t	to exist or "perpetual	35
(Date first trans	gualification sacted business in Flori	da. If corporation has EE SECTIONS 607.1	not transacted by	usiness in Florida, inse	rt "upon qualification	")
7 1040	5 Braden	Rus	· · · · · · · · · · · · · · · · · · ·			
·	S Brades	(Principal office	address)		<u> </u>	
Bra	dentan FL	7420	<u></u>	-		
	dentan, FL	(Current mailing	address)		<u> </u>	
& Inde	Street Adv (s) of corporation auth	icare)	e e		•	
	reet address of Flor					
Name:	John Det	Ew		1	e e e e e e e e e e e e e e e e e e e	ry f III - <del>Fyrij</del> - 1 <b>II</b> I
Office Address:	10405 Br Bradestan, (City)	aden Fun	· · · · · · · · · · · · · · · · · · ·		1	
	Bradesten,	PM	Floric	1a 34202		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	(City)	)	, 110410	(Zip code)	<u> </u>	<u> </u>
10. Registered a Having been nan designated in this further agree to	agent's acceptance: med as registered ag is application, I here comply with the pro- familiar with and ac	ent and to accept se by accept the appoi visions of all statute	rvice of proces ntment as regis	s for the above state tered agent and agr	ed corporation at th see to act in this cap	rasitu I
_	// /	(Registered agent's	s signature)	<u> </u>	<u> </u>	
44 4 4 4.						
11. Attached is a	certificate of exister	ice duly authenticate	ed, not more tha	in 90 days prior to de	elivery of this appli	cation 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: John F. DePew Address: 10405 Brades Rus Bradeston, FL 34202 Vice Chairman: Address: Director: \_ Address: \_\_ Address: **B. OFFICERS** President: John F. De Pew Vice President: \_\_\_\_\_ Address: Address: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 13. John F. Refew (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. John F. DePew / Chairman / President

(Typed or printed name and capacity of person signing application)

# Commonthealth of Hirginian



## State Corporation Commission

### I Certify the Following from the Records of the Commission:

MidAtlantic Capital Management, Inc. is a corporation existing under and by virtue of the laws of Virginia, and is in good standing.

The date of incorporation is August 18, 1993.

Nothing more is hereby certified.





Signed and Sealed at Richmond on this Date: September 9, 2002

Joel H. Peck, Clerk of the Commission