

	TRANSMITTAL LETTER
TO:	Registration Section Division of Corporations
SUBJ	ECT: ROYAL CONNECTIONS, INC
	(Name of corporation - must include suffix)
Dear S	Sir or Madam:
	nclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of ence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please	e return all correspondence concerning this matter to the following:
ARTI	HUR TANGUAY,
	(Name of Person)
ROYI	AL CONNECTIONS, INC.
·	(Firm/Company) 5000084724959
619	BENEDICTINE TERRACE *****70.00 ******70.00
	(Address)
SEBA	ASTIAN, FL 32958
<u></u>	(City/State and Zip code)
	500008472495 12/13/0201004021 **1150.0
For fi	urther information concerning this matter, please call:
	772-581-5579
	ARTHUR TANGUAY at 970 977 1968.
	(Name of Person) (Area Code & Daytime Telephone Number)
STRI	MAILING ADDRESS: FS 8
Regis Avai	tration Section Registration Section
	Tallahassee, FL 32399 Dr. C. Tallahassee, FL 32314
-	
EHEIO	Rised is a check for the following amount:
7,7,7,4	647 00 PT - P
AL:	\$70.00 Filing Fee \$78.75 Filing Fee & S78.75 Filing Fee & S87.50 Eiting Fee, Certificate of Status & Certified Copy. Certified Copy.
\c'\r	no ledgement DCC Filippo
	1200000 1000 00 11 125 20
1/1/22	Verificar 150.00 "



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

October 22, 2002

ARTHUR TANQUAY ROYAL CONNECTIONS, INC. 619 BENEDICTINE TERRACE SEBASTIAN, FL 32958

SUBJECT: ROYAL CONNECTIONS, INC.

Ref. Number: W02000030357

We have received your document for ROYAL CONNECTIONS, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1,150.00.

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.

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) 245-6913.

Letter Number: 402A00058349

Diane Cushing Corporate Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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.

Ι.	ROYAL CO	MNECTIONS: THE			- :				
	words or abbro	oration; must include the word "IN eviations of like import in language or partnership if not so contained	as will clearly	indicate that			ä		
2.	NH	•		04-338	7727				
		try under the law of which it is inco	orporated)	(FEI number, if applicable)					
4.	08/20/97		5.	PERPETU					
		(Date of incorporation)		(Duratio	n: Year corp	will cease to ex	tist or "per	petual")	
6.	10/01/01		<u></u>	w * ** ·	·			2.	
	(Date first tra	nsacted business in Florida. If corp (SEE SECTION					n qualifica	ition.")	
7.	619 BENE	EDICTINE TERRACE SEB	ASTIAN FI	32958					
	(Principal office address)								
	619 BENE		<u>ASTIAN FI</u>				·	<u>.</u>	
			(Current mailin	ng address)		[V	SE 83		
8.									
	(Purpose(s) of corporation authorize	d in home state	or country t	o be carried o	ut in state of Flo	rida) 🗀	⊒	
9.	Name and st	reet address of Florida register	red agent: (P.	O. Box or N	Iail Drop Bo	x NOT accept	≺ No aple) g		
	Name:	ARTHUR TANGUAY			••	XX III	4 5		
Office Address: 619 BENEDICTINE		619 BENEDICTINE TER	RRACE	·	com		~		
		SEBASTIAN			Florida	32958		-	
		(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 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.

Gegistered 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

6 p (2)

Chairman:	ARTHUR TANGUAY		
Address:	619 BENEDICTINE TERRACE		
	SEBASTIAN, FL 32958		
Vice Chair	man:		
Director:			
		,	
Director:			
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		ECRI	>
D OEE	ICEDO.	COP	5 1
B. OFFI	ICERS	1. 19. H	S In
President:	ARTHUR TANGUAY	<u> </u>	
Address:	619 BENEDICTINE TERRACE	ORDA ORDA	% ************************************
	SEBASTIAN, FL 32958	-	
Vice Presid	dent:		
Address:			
Secretary:			
Address:			
Treasurer:			
Address:			
	If necessary, you may attach an addendum to the application listing additional officers and	or direct	ore
/			
13. <u>L</u>	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the app	plication)	
14. ART	THUR TANGUAY, PRESIDENT		
*****	(Typed or printed name and capacity of person signing application)		

State of New Hampshire Department of State

CERTIFICATE OF EXISTENCE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify ROYAL CONNECTIONS, INC. is a New Hampshire corporation duly incorporated under the laws of the State of New Hampshire on August 27, 1997. I further certify that all fees and annual reports required by the Secretary of State's office have been received and that articles of dissolution have not been filed.

TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 2nd day of December, A.D. 2002

William M. Gardner Secretary of State

