F02000006367

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



900009324279

12/12/02--01010--001 **87.50

2002-34844
2002-34844
2002-34844
Comblish Pol. 14719
Comblish Pol. 14719

AL

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: COAST TO COAST EVENT SERVICES, INC.			
(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:			
DENISE PEACH, SECRETARY AND TREASURER			
(Name of Person)			
COAST TO COAST EVENT SERVICES, INC.			
(Firm/Company)			
P.O. BOX 5948			
PORTLAND, OR 97228 (Address)			
(City/State and Zip code)			
For further information concerning this matter, please call:			
DENISE PEACH at (503) 235-2585			
(Name of Person) (Area Code & Daytime Telephone Number)			
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. P.O. Box 6327 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 & Certificate of Status ☐ Certificate of Status & Certified Copy			



FLORIDA DÉPARTMENT OF STATE Jim Smith Secretary of State

December 12, 2002

DENISE PEACH P.O. BOX 5948 PORTLAND, OR 97228

SUBJECT: COAST TO COAST EVENT SERVICES, INC.

Ref. Number: W02000034844

OLORG 23 MIN. 56

We have received your document for COAST TO COAST EVENT SERVICES, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

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) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 402A00065768

FILED

02 DEC 23 AM 10: 56

SEUNE LANG OF STATE

RESOLUTION OF BOARD OF DIRECTORS

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

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

FILED

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED 23 AM 10 REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. COAST TO COAST EVENT SERVICES, INC	CORPORATED. $i\stackrel{\circ}{\mathbb{A}}$	LLAHASSEF
(Name of corporation; must include the word "INCORPORAT words or abbreviations of like import in language as will clearl natural person or partnership if not so contained in the name at	TED", "COMPANY", "CORPORATION" or ly indicate that it is a corporation instead of a	
2. OREGON 3.	93-1022097	
(State or country under the law of which it is incorporated)	(FEI number, if applicable)	
4. February 16, 1990 5.	PerpetuaL	
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetua	al")
6. UPON QUALIFICATION		
(Date first transacted business in Florida. If corporation has no (SEE SECTIONS 607.150	ot transacted business in Florida, insert "upon qualificati 1, 607.1502 and 817.155, F.S.)	on.")
7. One CENTER COURT, PORTLAND, OR 97	227	
(Principal office add	dress)	4 7×4/44
P.O. BOX 5948, PORTLAND, OR 97228		
(Current mailing add	dress)	
8. EVENT SERVICES		
(Purpose(s) of corporation authorized in home state or co	country to be carried out in state of Florida)	
9. Name and <u>street address</u> of Florida registered agent:	(P.O. Box or Mail Drop Box NOT acceptable)	
Name: DENNIS E. SULLIVAN	4	. .
Office Address: 1823 SW 38 TH LANK	5	
CAPE CORAL	Florida 33914	
(City)	, Florida 33914 (Zip code)	-
10. Registered agent's acceptance: Having been named as registered agent and to accept serv designated in this application, I hereby accept the appoint further agree to comply with the provisions of all statutes	tment as registered agent and agree to act in this	capacity. I

/ /

duties, 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 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	FILED
Chairman: DOUG PEACH	02 DEC 23 AM 10: 56
Address: P.O. BOX 5948	SEUNE LANT OF STATE
PORTLAND, OR 97228	TALLAHASSEE, FLORIDA
Vice Chairman: DENISE PEACH	
Address: P.O. BOX 5948	<u> </u>
PORTLAND, OR 97228	
Director: N/A	
Address: N/A	
Director: N/A	
Address: N/A	<u> </u>
B. OFFICERS President: DOUG PEACH	
Address: P.O. BOX 5948	1 2 4 4 4
PORTLAND, OR 97228	
Vice President: N/A	a firm of the
Address: N/A	The state of the s
DENISE PEACH	
Secretary.	N 7 877 977 17
Address: P.O. BOX 5948, PORTLAND, OR 97228 Treasurer: DENISE PEACH	
D.O. DOV FOAD DODT! AND OD 07000	<u>rocking in the second of the </u>
Address: P.O. BOX 5948, PORTLAND, OR 97228	
NOTE: If necessary, you may attach an addendum to the application listing additional office	cers and/or directors.
13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12	of the application)
	reasurer
(Typed or printed name and capacity of person signing application))

CERTIFICATE

State of Oregon 12 DEC 23 AMI

OFFICE OF THE SECRETARY OF STATE
Corporation Division

I, BILL BRADBURY, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:

COAST TO COAST EVENT SERVICES, INC.

was

incorporated under the Oregon

Business Corporation Act

on

February 16, 1990

and is active on the records of the Corporation Division as of the date of this certificate.



In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.

BILL BRADBURY, Secretary of State

Marilyn l

November 8, 2002