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(Requestor's Name)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations					
SUBJECT: DECEMBER &	25-43 INC.				
(Name of	corporation - must include suffix)	PC x n			
Dear Sir or Madam:		S 2 E			
The enclosed "Application by Foreign Corporation for Ar Existence", and check are submitted to register the above	ithorization to Transact Business in Fl referenced foreign corporation to trans	orida", "Cértificate of sact business in Florida.			
Please return all correspondence concerning this matter to	the following:	Gr. F			
RAY Sessoms P	Res				
(Nar	ne of Person)				
December 2512 INC	or BAY BREEZE	PATIOY GIFTS			
802 Highway 400 South	ne/Company) 32 Foncest Sh	ORC DRIVE			
	Address)				
DAWSONVILLE GA 30534	DESTIN FloR	10A 32550			
RAY Sessons, PRES (Name of Person) December 2542 INC on BAY BREEZE PATIOY GIFTS (Firm/Company) 802 Highway 400 South 32 FOREST Shore DRIVE (Address) DAWSONVILLE GA 30534 DESTIN Florion 32550 (City/State and Zip code)					
For further information concerning this matter, please call:					
206-216-4500 oc					
Ray Sessoms at 850-269-4666 (Name of Person) (Area Code & Daytime Telephone Number)					
(Name of Person) (Area Code & Daytime Telephone Number)					
STREET ADDRESS:	MAILING ADDRESS:				
Registration Section Division of Corporations	Registration Section Division of Corporations				
409 E. Gaines St.	P.O. Box 6327				
Tallahassee, FL 32399	Tallahassee, FL 32314				
Enclosed is a check for the following amount:					
\$70.00 Filing Fee \$\times \text{Cartificate of Status}\$	S78,75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy			

~ 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.

į,	recember 25th INC.				
(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					
	natural person or partnership if not so contained in the name at present.)				
	<i>/// ./ ∧ ⊆</i>				
2.	(State or country under the law of which it is incorporated) (FEI number, if applicable)				
	(7.5 6)				
4	(Date of incorporation) 5. Perpetual (Burstion: Year corp. will cease to exist or "perpetual")				
٠.	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpeture")				
6.					
	(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.	802 Nighway 400 South DAWSONVIlle GA 30534 (Principal office address)				
(Principal office address)					
	SAME				
	(Current mailing address)				
(Current mailing address)					
8. ReTAil SAIR OF PATIO FURN + GIFTS + SILK Flowers (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)					
٠.	(Purpose(s) of corporation authorized in home 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 Drop Box NOT acceptable)					
	Name: Ray Sessoms				
<u> </u>	Tice Address: 1250 Whitewood way				
OD					
	Niceville FL 32528, Florida				
	(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.

(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	
Chairman:	
Address:	
Vice Chairman:	
Address:	15 15 15
	A T
	31 N F
Director:	
Address:	=
Director:	
Address:	
President: RAY SESSOMS Address: BOZ Wighway HOO South DAW SONVILLE GA 30534	
Vice President:	
Address:	
Secretary: Ron Wheeler	
Address: 802 Highway 400 South DAWSONVille	GA 30534
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional	
13. Signature of Chairman, Vice Chairman, or any officer listed in number	10.01
	12 of the application)
14 (Typed or printed name and capacity of person signing app	plication)



I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **DECEMBER 25TH, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since June 12, 1997, and is in good standing in this state.

By

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on March 3, 2003.

DEAN HELLER
Secretary of State

Jen Helle

Certification Clerk