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#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 9, 2003

JAMES PATTISON 8260 NW 49TH MANOR CORAL SPRINGS, FL 33067

SUBJECT: LATTIS, INC. Ref. Number: W03000010009

We have received your document for LATTIS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 303A00021122

#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT:	
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:	
James W. Parrisan (Name of Person)  Lattis, Inc. (Firm/Company)	
(Name of Person)	
(Firm/Company)	
(Firm/Company)  8260 NW 49 Manow  (Address)  Coral Speins of 153067  (City/State and Zip code)	
OCLEONW 47 - A Janan (Address)	
Casal Sante Fl 330/2	
(City/State and Zip code)	
For further information concerning this matter, please call:	
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(Name of Person) at (954) ZZ7.6830  (Area Code & Daytime Telephone Number)	
(Litatile of Lettors) (Literature of Education Lateralians)	
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St.  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327	
Tallahassee, FL 32399 Tallahassee, FL 32314	
Enclosed is a check for the following amount:	
70.00 Filing Fee \$\Boxed{1}\$ \$78.75 Filing Fee & \$\Boxed{1}\$ \$78.75 Filing Fee & \$\Boxed{2}\$\$ \$87.50 Filing Fee, Certificate of Status Certified Copy 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. (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.) (State or country under the law of which it is incorporated) (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.) (Principal office address) (Current mailing address) PERVICES (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) Office Address: 3760 A)U) 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.

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.

(Registered agent's signature)

### 12. Names and business addresses of officer's and/or directors: A. DIRECTORS Chairman: Vice Chairman: Address: \_\_\_ Director: \_ Address: \_ Director: \_ Address: **B. OFFICERS** President: James W. PATTISON Address: 8260 NW 49th Ngn or Vice President: Address: Secretary: Address: \_ Treasurer: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) S W. Pattism Pecsition (Typed or printed name and capacity of person signing application)

## STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

#### LATTIS, INC.

duly filed the requisite documents to commence business activities under the laws of State of Indiana on January 18, 1994, and was in existence or authorized to transact business in the State of Indiana on April 04, 2003.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Fourth Day of April, 2003.

TODD ROKITA, Secretary of State

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