

FD3000002707

Florida Department of State
Division of Corporations
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To:

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Fax Number : (850)205-0383

From:

Account Name : RUDEN, MCCLOSKEY, SMITH, SCHUSTER & RUSSELL, P.A.
Account Number : 076077000521
Phone : (954)527-2428
Fax Number : (954)764-4996

DIVISION OF CORPORATION

03 MAY 30 AM 11:20

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FOREIGN PROFIT QUALIFICATION

Faille & Associates, Inc.

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$87.50

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May-30-2003 10:42am From:RUDEN MCCLOSKY

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PAGE 1/1 "RCVD AT 5302003 10:21:00 AM [E-mail Delivery Time] BY: FT FAX/14 "DN:4001 "CSO:Department of State "DURATION (min):00:34" AX



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

May 30, 2003

RUDEN, MCCLOSKY, SMITH, ET AL

SUBJECT: FAILE & ASSOCIATES, INC.
REF: W03000015358

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

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) 245-6025.

Travor Brumbley
Document Specialist

FAX Aud. #: H03000203971
Letter Number: 203A00034086

03 MAY 30 PM 12:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

**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.**

Faille & Associates, 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.)

Delaware

3. applied for

(State or country under the law of which it is incorporated)

(FEL number, if applicable)

04/02/03

5. Perpetual

(Date of incorporation)

(Duration: Year corp. will cease to exist or "perpetual")

Upon Qualification

(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 617.153, F.S.)

4020 East 12th Avenue, Tampa, Florida, 33605

(Principal office address)

4020 East 12th Avenue, Tampa, Florida, 33605

(Current mailing address)

Holding Company

(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 agents (P.O. Box or Mail Drop Box NOT acceptable)

Name: Jim Faille

Office Address: 4020 E. 12th Avenue

Tampa,

(City)

Florida 33605

(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation as 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.

03 MAY 30 PM 12:06

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Jim Falle

Address: 4020 East 12th Avenue, Tampa, Florida, 33605

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Jim Falle

Address: 4020 East 12th Avenue, Tampa, Florida, 33605

Vice President: _____

Address: _____

Secretary: Jim Falle

Address: 4020 East 12th Avenue, Tampa, Florida, 33605

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Jim Falle, President

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

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Delaware

PAGE 1

The First State

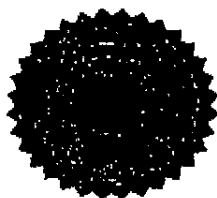
I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FAILE & ASSOCIATES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF APRIL, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FAILE & ASSOCIATES, INC." WAS INCORPORATED ON THE SECOND DAY OF APRIL, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

3643444 8300

030268691



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 2383245

DATE: 04-24-03