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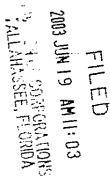
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W03-14990

J. BRYAN MAY 2 7 2003

J. BRYAN JUN 2 4 2003

#### TRANSMITTAL LETTER

Division of Corporations
SUBJECT: SNYDER, 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:
GARY D. SNYOER (Name of Person)
(Name of Person)
SNYOER, INC. (Firm/Company)
(Firm/Company)
665 BOLDEN SUNSHINE CIR (Address)  ORLANDO FL 32807
(Address)
ORLANDO FL 32807
(City/State and Zip code)
For further information concerning this matter, please call:
(Name of Person)  (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. 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 Sectificate of Status Sectified Copy Sectificate of Status Certified Copy Certified Copy



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 27, 2003

GARY D. SNYDER SNYDER, INC. 665 GOLDEN SUNSHINE CIR. ORLANDO, FL 32807

SUBJECT: SNYDER, INC. Ref. Number: W03000014990



We have received your document for SNYDER, 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:

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.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Letter Number: 203A00033258

Joey Bryan Document Specialist

### RESOLUTION OF BOARD OF DIRECTORS

(Please print or type) I, the undersigned SNYDER, that this Resolution of the Board of Directors of \_ (Corporate Name) a corporation duly organized and existing under the laws of the State of \_\_\_\_ was duly adopted on \_ Be it resolved, that organized and existing in the State of for use in Florida.

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

INHS19(1/00)

ATTN: JOEY BRYAN - DOCUMENT SPECIALIST LETTER # 203 A 00033258 REFERENCE # W030000 14990

## 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.
1. SNYOER INCORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.  (Name of corporation: must include the word "INCORPORATED" "COMPANY" "CORPORATION" of Corporation."
words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a
2. NEVADA  (State or country under the law of which it is incorporated)  (FEI number, if applicable)  PERPETUAL
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 10-15-02 5. PERPETUAL (Duration) 5. (Duration: Year corp. will cease to exist or "perpetual")
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 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 817.155, F.S.)
7. 2764 LAKE SAHARA OR STE 1/5 LAS VEGAS, NV. (Principal office address)  2764 LAKE SAHARA OR. STE 1/5 LAS VEGAS, NV. (Current mailing address)  8911
(Principal office address) 89/17
2764 LAKE SAHARA OR. STEVS LAS VEGAS AV.
(Current mailing address) 89//
8. OPERATE TRUCKING TRANSPORTATION FROM ORLANDE
(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: GARY O. SNYDER
Office Address: 665 GOLDEN SUNSHINE CIR
<u> </u>
(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.

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. DIRECTOR	S	
Chairman:		
Address:		
	20.	
Vice Chairman:		
		$\frac{1}{2}$
	The state of the s	<del></del>
Director		?>
	Cotton Cotton	<u> </u>
Address:	7 <u>0</u>	<u> </u>
Director:		
Address:		
<del></del>		
B. OFFICERS		
resident:	GARY D. SNYDER	
Address:	GARY D. SNYDER 665 GOLDEN SUNSHINE CIR	
	ORLANDO, PL. 32807	_
7: 70 13		<del></del>
		—
ddress:		—
·		
ecretary:	GARY D. SMYDER 665 GOLDEN SUNSHINE CIR DRIANDOFO (SAME AS ABOVE)	
.ddress:	665 GOLDEN SUNSHINE CIR DRIANDO F	<u>Z</u> ,
reasurer:	(SAME AS ABOVE)	-8C
.ddress:		
OTE: If necess	sary, you may attach an addendum to the application listing additional officers and/or directors.	
3	Man W. G. PRES.	
(S	Signature of Chalrman, Vice Chairman, or any officer listed in number 12 of the application)	
4	GARY D. SNYDER, PRES.	
	(Typed or printed name and capacity of person signing application)	



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

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, 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, **SNYDER**, **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 October 15, 2002, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on April 29, 2003.

DEAN HELLER Secretary of State

Ву

Certification Clerk