

**FO300 0003558**

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H03000235058 2)))

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850) 205-0383

From:

Account Name : M. BURR KEIM COMPANY  
Account Number : 119990000242  
Phone : (215) 563-8113  
Fax Number : (215) 977-9386

**FOREIGN PROFIT QUALIFICATION**

**MOUNTAIN ACCESSORIES, INC.**

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$78.75

FILED  
03 JUL 17 AM 10:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
03 JUL 17 AM 10:39  
DIVISION OF CORPORATION

JB  
7-17-03

(H03000235058 2)

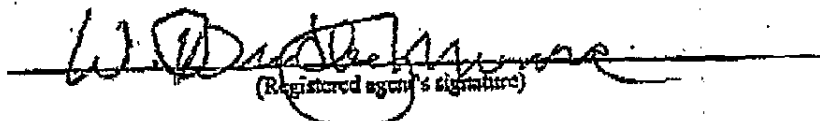
# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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. Mountain Accessories, 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.)
2. New Jersey 3. 22-3486741  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. January 14, 1997 5. 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. 1301 Metropolitan Avenue, Suite 5, West Deptford, New Jersey 08066  
(Principal office address)  
1301 Metropolitan Avenue, Suite 5, West Deptford, New Jersey 08066  
(Current mailing address)
8. Distribution of plumbing products.  
(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: W. Bradley Munroe, Esq.  
Office Address: 239 E. Virginia Street  
Tallahassee, Florida 32301  
(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.

(H03000235958 2)

FILED  
03 JUL 17 AM 10:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(H03000235058 2)

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

## A. DIRECTORS

Chairman: Kenneth McAlpineAddress: 1301 Metropolitan Avenue, Suite 5West Deptford, New Jersey 08066

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Chris TomafskyAddress: 1301 Metropolitan Avenue, Suite 5West Deptford, New Jersey 08066Director: James TomafskyAddress: 1301 Metropolitan Avenue, Suite 5West Deptford, New Jersey 08066

## B. OFFICERS

President: Kenneth McAlpineAddress: 1301 Metropolitan Avenue, Suite 5West Deptford, New Jersey 08066

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

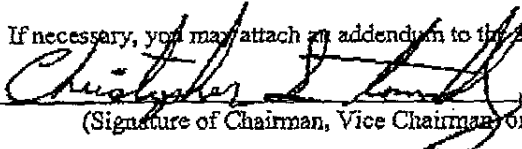
Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

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. Christopher Tomafsky, Director of Operations  
(Typed or printed name and capacity of person signing application)

(H03000235058 2)

(H03000235058 2)

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

MOUNTAIN ACCESSORIES, INC.

0100691944

*With the Previous or Alternate Name*

MOUNTAIN PLUMBING PRODUCTS (Alternate Name)

MOUNTAIN ACCESSORIES (Alternate Name)

*I, the Treasurer of the State of New Jersey,  
do hereby certify that the above-named  
New Jersey Domestic Profit Corporation was  
registered by this office on January 14, 1997.*

*As of the date of this certificate, said business  
continues as an active business in good standing  
in the State of New Jersey, and its Annual Reports  
are current.*

*I further certify that the registered agent and  
registered office are:*

Chris Tomafsky  
1302 Dawn Ct  
Mullica Hill, NJ 08062

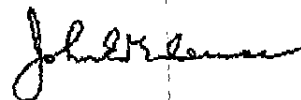
*Continued on next page . . .*

(H03000235058 2)

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

MOUNTAIN ACCESSORIES, INC.

IN TESTIMONY WHEREOF, I have  
hereunto set my hand and  
affixed my Official Seal  
at Trenton, this  
19th day of June, 2003



John E McCormac, CPA  
State Treasurer

