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(Requestor's Name)	i
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(City/State/Zip/Phone #)	
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PICK-UP WAIT	MAIL
(Business Entity Name)	
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#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporati	ions	
SUBJECT: CLEAT	<u> </u>	
	(Name of corporation - must include surfix)	
Dear Sir or Madam:		
	Foreign Corporation for Authorization to Transact Business in Florida", d check are submitted to register the above referenced foreign corporation to	
Please return all corresponder	ace concerning this matter to the following:	
SUSAN B	ANKOSZ	
^	(Name of Person)	
Computeci		
	(Firm/Company)	
	23134	
ST PETER	23134  (Address)  88URG FL 33742  (City/State and Zip code)  (City/State and Zip code)	
	(City/State and Zip code)	
For further information conce	rning this matter, please call:	į
SUSAN BI (Name of Person)	ANKOS2 <sub>at</sub> (727) 576-4998 SH ST (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 fol	lowing amount:	
	78.75 Filing Fee & S78.75 Filing Fee & S87.50 Filing Fee, Certificate of Status Certified Copy 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.

1.	CREATION STA	MON, INCORPORATED
	(Enter name of corporation; must include "Inc.," "Co.," "Corp," "Inc," "Co," or "Co.	le "INCORPORATED," "COMPANY," "CORPORATION,"
	:	
	(If name unavailable in Florida, enter al	ternate corporate name adopted for the purpose of transacting business in Florida)
2.	DELAWARE	3. 32-0101552
	(State or country under the law of which	it is incorporated)  3. 32-010 552  (FEI number, if applicable)
4.	12/10/2003	5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")
	(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
	UPON QUALIFI	CA-TION
	(SEE	If corporation has not transacted business in Florida, insert "upon qualification.")  SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7.	2995 THRONG	E BLVD N, ST PETERSBURG, FL 33710
	,	(Principal office address)
	2995 Tyrone	EBUNN, ST PETERSBURG, FL 33710 (Principal office address)  BUNN, ST PETERSBURG, FL 33710 (Current mailing address)
8.	SALE OF SCRAPBO	ZEED IN SCHAPBOOKING SUPPLIES F  ZEED IN HOME State or country to be carried out in state of Florida)
9	Name and street address of Florid	a registered agent: (P.O. Box or Mail Drop Box NOT acceptab
٠.		:
0		NERCE AVE N
	SAINT PE	TERSBURG, Florida 33716 Zir: J
	(City)	(Zip code)
10	. Registered agent's acceptance:	
		at and to accept service of process for the above stated corporation at the place
		accept the appointment as registered agent and agree to act in this capacity. I sions of all statutes relative to the proper and complete performance of my duties,
ar	d I am familiar with and accept the	obligations of my position as registered agent.
	VMAN	Bankosz

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 officers and/or directors:

A. DIRECTORS			
Chairman:			
Address:	·		
		. <u>.</u>	_
Vice Chairman:			
Address:			
<u> </u>			
Director:		···	
Address:			
Director:			
Address:			
B. OFFICERS	₹	0	
President: TANET JENSEN		<del></del>	
Address: 2501 SOUTHERN DAK CIRCLE	ASS FATE	- <del>- 2</del> -	71
CLEARWATER, FL 337104		7)	
Vice President: KENNETH JENSEN	OR S	ယ့်	
Address: 2501 SOUTHERN OAK CIRCLE	Stri	57	
CLEARWATER, FL 33764	-		
Secretary:			
Address:			
Treasurer:			
Address:	·		
NOTE: If necessary, you may attach an addendum to the application listing additional officers and	or director	rs.	
(Signature of Director or Officer listed in number 12 of the application)			
14. JAKET JENSEN, PRESIDENT  (Typed or printed name and capacity of person signing application)			
(Typed or printed name and capacity of person signing application)			

## Delaware

PAGE 1

### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CREATION STATION, 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 SEVENTH DAY OF JANUARY, A.D. 2004.



Warriet Smith Windson, Secretary of State

AUTHENTICATION: 2854295

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