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SECRETARY OF STATE
DIVISION OF STATE
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FLORIDA DEPARTMENT OF STATE. Glenda E. Hood Secretary of State

February 19, 2004

BRUCE RODEN 560 HUNTING LODGE DRIVE MIAMI SPRINGS, FL 33166

SUBJECT: KLAUS PARKING SYSTEMS ATLANTIC, INC.

Ref. Number: W04000007183

We have received your document for KLAUS PARKING SYSTEMS ATLANTIC, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's date of incorporation/organization must be listed in the document.

The document must have original signatures.

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) 245-6020.

Tammi Cline Document Specialist

Letter Number: 804A00011447

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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
NONCHAIL
SUBJECT: 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:
Klaus Parking
560 Hunting Lodge Dr.
Miami Spring FL 3316 & Som (City State and Zinfode)
(Cityballe and Esphole)
For further information concerning this matter, please call:
Pare Toden at 305, 807, 0064 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:
S70.00 Filing Fee S78.75 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. Klaus Parking Systems Attantic, Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"	
	"Inc.," "Co.," "Corp," "Inc." "Co," or "Corp.")	
	(If name unavailable in Florida, enter alternate corporate name deopted for the purpose of transacting business in Florida)	
	2 New York 3 52 225 8274	
1	(State or country under the law of which it is incorporated) (FEI number, if applicable) 7 20 2000 5. Develue	
	(Date of incorporation) (Dupition: Year corp. will cease to exist or "perpetual")	
	e upon qualification	, <u>.</u>
	(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.)	Ą
	7. AZ Wetcate Street Toronto ON Car (Principal office address)	nord a
	(Principal office address) $max 1$	R 8
	(Current mailing address)	2
	· · · · · · · · · · · · · · · · · · ·	<
	8. Sales of CAR LIMIS	SECRE
	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	SECRETAR VISIONE TAR
	(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)	SECRETARY OF
	9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Buce Roden	SECRETARY OF STA
	(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: Buce Poden Office Address: Soo Hunting Lako DR.	SECRETARY OF STATE
	9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Buce Poden	SECRETARY OF STATE
	(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: Bruce Roden Office Address: Soo Hunting Labor R. (City) 10. Registered agent's acceptance:	SECRETARY OF STATE
	(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: Buce Roden Office Address: Soo Hunding Lando R. (City) 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
	(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: Buce Roden Office Address: Soo Hunting Lando R. (City) 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.	I
	(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: Buce Roden Office Address: Sho I tunting Lando (City) Florida (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, further agree to comply with the provisions of all statutes relative to the proper and complete performance of my due	I

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:

Address:	42 METCALFE JT.	
	TORONTO, ON MYXIRS	
Vice Chairma	nan;	
Address:		
Address:		
Director:		
	TORONTO, ON M4X IRP	THE SECTION OF THE PROPERTY OF
Vice Presiden	ent:	
Address:	PR CR	S.E.
Secretary:	17	A
Address:	TS TS	· *.
Treasurer:		_
Address:	necessary, you may attach an addendum to the application listing additional officers and/or directors.	

State of New York Department of State

I hereby certify, that the Certificate of Incorporation of KLAUS PARKING SYSTEMS ATLANTIC, INC. was filed on 07/20/2000, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation. I further certify the following:

A Biennial Statement was filed 08/14/2002.

I further certify, that no other documents have been filed by such Corporation.

Witness my hand and the official seal of the Department of State at the City of Albany, this 28th day of January two thousand and four.

Şecrētary of State

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