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#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 18, 2004

WILLIAM G. SMITH WILLIAM A. SMITH, INC. PO BOX 49, 1064 RTE 12A PLAINFIELD, NH 03781

SUBJECT: WILLIAM A. SMITH, INC.

Ref. Number: W04000010891

We have received your document for WILLIAM A. SMITH, 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 document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6958.

Lee Rivers Document Specialist

Letter Number: 204A00018063

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### TRANSMITTAL LETTER

<b>TO:</b> Registration Section Division of Corporations	<b>.</b>		
SUBJECT: Willia	m A, Smith, I	nc	
	<del></del>	n - must include suffix)	<del></del>
Dear Sir or Madam:			
The enclosed "Application by Fo "Certificate of Existence", and claransact business in Florida.			
Please return all correspondence	_	to the following:	W04-10891
William_G.		_ <del></del>	<del></del>
	(Name of	Person)	· · -
William A.	Smith, Inc.		
	(Firm/Co	mpany)	
PO Box 49,	1064 Rte 12	A	
	(Addı	ress)	* <u>:</u>
Plainfield	, New Hampshi	re 03781	
<del></del>		and Zip code)	<del> </del>
For further information concerni	ng this matter, please c	all:	04 PM
			SECRETAR IVISION OF C 04 MAR 26
William G. Smith	at (603	)675-2549	
(Name of Person)	(Area (	Code & Daytime Telephone	1301110011 =============================
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	AM 10: 06
Enclosed is a check for the follo	wing amount:		
☐ \$70.00 Filing Fee ☐ \$78	-	3 \$78.75 Filing Fee & Z	\$ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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

ÎN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(Enter name of c	A, Smith, Inc. orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION,"		
	m G. Smith, Inc	me adopted for the purpose of transacting business in Florida		
			,	
<ol> <li>New Hamp</li> <li>(State or country)</li> </ol>	shire under the law of which it is incorporated)	302_0278524 (FEI number, if applicable)	<del>-</del> ·	
4 19	075	5. <u>perpetual</u> (Duration: Year corp. will cease to exist or "perpetual")	_	
(Date	e of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")		
6. upon (Date first transact	e qualification cted business in Florida. If corporation has (SEE SECTIONS 607.13	not transacted business in Florida, insert "upon qualification. 501, 607.1502 and 817.155, F.S.)	<u>"</u> )	
	·	hampshire 03781 address)	_	,
PU BC	(Current mailing		_	
·,	uctioneering			0
(Purpose(	s) of corporation authorized in home state o	r country to be carried out in state of Florida)	170	15. 15.
9. Name and str	<u>eet address</u> of Florida registered agen	it: (P.O. Box or Mail Drop Box NOT acceptable)	04 HAR 26	왕
Name:	Merilyn Smith		6	825
Office Address:	809 24th Ave. West		AM 10: 06	RP ST
	Palmetto	, Florida(Zip code)	0	ATE OF
	(City)	(Zip code)	יס	35
Having been nan designated in this	s application, I hereby accept the appo	ervice of process for the above stated corporation at the intment as registered agent and agree to act in this cap	acity	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:

and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

~			
· · · · · · · · · · · · · · · · · · ·			
Vice Chairman:		·	
Address:			
<u> </u>			
Director:			
Address:			
D:	- <del>1                                   </del>		
Address:			
B. OFFICERS			=
B. OFFICERS  President: Will	lliam G. Smith	<u> </u>	DIVISION STORY
B. OFFICERS  President: Will  Address: 25	lliam G. Smith  Carpenter St.	01 HAD 2	DIVISION OF
B. OFFICERS  President: Will  Address: 25	Carpenter St.	04 HAR 26	DIVISION OF CO
B. OFFICERS  President:	Carpenter St.	04 HAR 26	DIVISION OF CO
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B. OFFICERS  President: Will Address: 25  Not  Vice President:  Address:  Secretary: Me	Carpenter St.	04 HAR 26 AM 10: 0	DIVISION OF CORPORALIO
B. OFFICERS  President: Will  Address: 25  Not  Vice President:  Address:  Secretary: Me  Address: P0	Carpenter St. rwich, Vt 05055  rilyn S. Smith  Box 49, 9 Peterson Rd., Plainfield, N. H. 03781	04 HAR 26 AM 10: 0	DIVISION OF CORPORALIO
B. OFFICERS  President:	Carpenter St. rwich, Vt 05055	04 HAR 26 AM 10: 0	DIVISION OF CORPORALIO
B. OFFICERS  President:	Carpenter St.  cwich, Vt 05055  rilyn S. Smith  Box 49, 9 Peterson Rd., Plainfield, N. H. 03781	04 HAR 26 AM 10: 0	DIVISION OF CORPORALIO

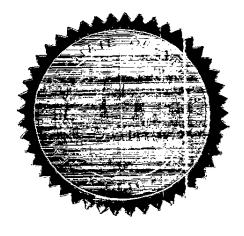
## State of New Hampshire Bepartment of State

#### CERTIFICATE OF EXISTENCE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify WILLIAM A. SMITH, INC. is a New Hampshire corporation duly incorporated under the laws of the State of New Hampshire on JUNE 11, 1970. I further certify that all fees and annual reports required by the Secretary of State's office have been received and that articles of dissolution have not been filed.

DIVISION OF CORPORATIONS
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TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 5<sup>TH</sup> day of MARCH, A.D. 2004



William M. Dal

William M. Gardner Secretary of State