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#### TRANSMITTAL LETTER

Mark C3 PM 1.24 TO: Registration Section **Division of Corporations** SUBJECT: Global Triad, 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: Thomas L. Hauff (Name of Person) Global Triad, Inc. (Firm/Company) 5543 Burlwood Drive (Address) Orlando, FL 32810 (City/State and Zip code) For further information concerning this matter, please call: at (407 Thomas L. Hauff 294-3727 (Name of Person) (Area Code & Daytime Telephone Number) STREET ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations Division of Corporations 409 E. Gaines St. P.O. Box 6327 Tallahassee, FL 32399 Tallahassee, FL 32314 Enclosed is a check for the following amount: □ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & **☑** \$87.50 Filing Fee, Certificate of Status Certificate of Status & Certified Copy 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.	Global Triad, Incorporated		
	(Enter name of corporation; must include "INCORPORATE "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	ĒĎ,	" "COMPANY," "CORPORATION,"
	(If name unavailable in Florida, enter alternate corporate na	me	adopted for the purpose of transacting business in Florida)
2.	Nevada	3.	91-1894164
	(State or country under the law of which it is incorporated)		(FEI number, if applicable)
4.	March 19, 1997	5.	perpetual
•	(Date of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")
6.	upon qualification		
7.	831 West Morse Blvd., Winter Park, FL 32789 (Principal office a	SO I	ress)
8.	(Current mailing a Digital Communications	add	lress)
	(Purpose(s) of corporation authorized in home state o	rc	ountry to be carried out in state of Florida)
9.	Name and street address of Florida registered agen	t:	(P.O. Box or Mail Drop Box NOT acceptable)
	Name: Thomas L. Hauff	_	
O:	ffice Address: 5543 Burlwood Drive		
	Orlando		, Florida <b>32810</b>
	(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.

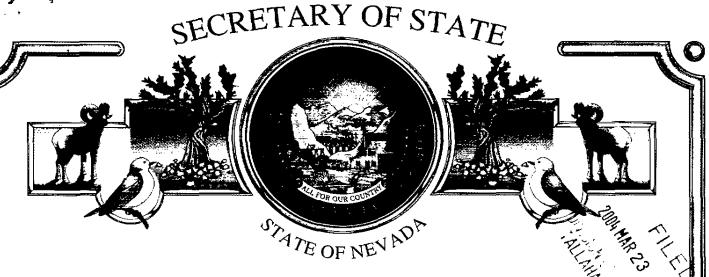
(Registered agent's signature)

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

### A. DIRECTORS

Chairman	n; Michael J. Schweitzer
	903 Via Lombardi
	Winter Park, F1 32789
Vice Cha	irman:
Address:	
	Thomas L. Hauff
Address:	5543 Burlwood Drive
	Oriando, FL
Director:	John J. Medico
Address:	6106 New Paris Way
	Ellenton, FL 34222
B. OFF	ICERS
President	Michael J. Schweitzer
Address:	903 Via Lombardi
	Winter Park, Fl 32789
Vice Pres	sident: Antonio F. Mellone
Address:	3152 SE 18th Terrace
	Oakland Park, FL 33334
Secretary	Jay O. Wright
Address:	9621 Trailridge Terrace, Potomac MD 29854
Treasurer	Thomas L. Hauff
	5543 Burlwood Drive, Orlando, FL 32810
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors.  (Signature of Director or Officer listed in number 12 of the application)
-7	(Signature of Director or Officer listed in number 12 of the application)
14 <b>Th</b>	omas L. Hauff, Director, Treasurer

mas L. Haum, Director, Treasurer



# 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, and limited-liability partnerships 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, **GLOBAL TRIAD**, **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 **March 19**, **1997**, 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 Las Vegas, Nevada, on **February 23, 2004**.

DEAN HELLER Secretary of State

Ву

Certification Clerk

