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Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	





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DIVISION OF CORPORATIONS

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#### TRANSMITTAL LETTER

TO:	Registration Sec Division of Corp						
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Dear S	ir or Madam:						
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Please	return all correspo	ondence concerning t	his matter	to the following:			_
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			(Name of	Person)		3.	_ 555 555
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For fur	ther information	concerning this matte	r, please c	all:			
Ba	(Name of Perso	Dmith at (	813 (Area (	SO6-C	ohone Numl	ber)	
Registr Division 409 E.	ET ADDRESS: ration Section on of Corporations Gaines St. assee, FL 32399	<b>S</b>		MAILING ADDRE Registration Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323	tions		
Enclos	ed is a check for t	he following amount	:				
<b>⊅</b> \$70	.00 Filing Fee	\$78.75 Filing Fe Certificate of St		\$78.75 Filing Fee & Certified Copy	Cer	.50 Filing Fee, rtificate of Statu rtified Copy	s &

## 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. (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 adopted for the purpose of transacting business in Florida) (State or country under the law of which it is incorporated) (Date of incorporation) (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.) est Waters (Principal office address) (Current mailing address) 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) 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.

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. DIREC				1 11		
Chairman:	BRANTZEY P. Smith		<del>ann 181</del> 0 a	· 125	•	· ***
Address:	7530 West Waters A	ve.	SteP			
-	Jampa FC 33615					
Vice Chairn	nan:	,		र हा		
Address: _					<del></del>	<u></u>
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Director: _	<u> </u>		Anada ya	<u> </u>	<u>`</u>	
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	Brantley P. Smith		Sa. (	<u> </u>	<u></u>	AND SECOND
President: _ Address: _	7530 West Waters +		Ster	5	<u>-</u>	
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	7530 West Waters + Tampa Fr 33615		Ste	5	<u> </u>	ALIENS -
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Address:  Vice Preside	7530 West Waters + Tampa Fr 37615		Ster	5	<u> </u>	2005
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Address: Vice Preside Address: Secretary: _ Address: Treasurer: _	Tompa Fr 372615	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Steven		<b>4</b>	
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Address: Vice Preside Address: Secretary: Address: Treasurer: Address: NOTE: If	Tampa F 33/215 ent:  necessary, you may attach an addendum to the application li	isting add	Ste (	and/or direction	ectors.	· · · ·
Address: Vice Preside Address: Secretary: _ Address: Treasurer: _ Address:	Tampa F 33/215 ent:  necessary, you may attach an addendum to the application li	isting add	Ste (	and/or direction	ectors.	· · · ·
Address: Vice Preside Address: Secretary: Address: Treasurer: Address: NOTE: If	Tampa F 37215 ent:  Inceessary, you shay attach an addendum to the application li	isting add	Ste (	s and/or dir	ectors.	, \$ 54 <u></u>

# Delaware

### The First State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TAMPA SURPLUS, 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 SEVENTEENTH DAY OF JUNE, A.D. 2004.

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3177903

DATE: 06-17-04

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