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The of

TRANSMITTAL LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Signet Trading	Incorporated
(Name of corporati	on - must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," and check are submitted to transact business in Florida.	
Please return all correspondence concerning this matter	r to the following:
Gov D. Craia	
(Name o	f Person)
Signet Inding Inc	ompany)
15350 South West 248+	Street
	dress)
Homestrad, Florida (City/State	33032 and Zip code)
For further information concerning this matter, please SOV D. Crojo at (305)	ALLA JU
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:	
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certified Copy Certified Copy Certified Copy



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 8, 2004

GUY D CRAIG SIGNET TRADING INCORPORATED 15350 SW 248TH ST HOMESTEAD, FL 33032

SUBJECT: SIGNET TRADING INCORPORATED

Ref. Number: W04000026089

We have received your document for SIGNET TRADING INCORPORATED and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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 Fall (850) 245-6025.

Trevor Brumbley Document Specialist

Letter Number: 904A00043798

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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. Signest Trading Incorporated	
(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	a)
2. DELAWARE 3. 05-050579 (EIN.) (State or country under the law of which it is incorporated) (FEI number, if applicable)	_
A	-
4. JUNE 10 1999 5. YERPETUAL	
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual"	")
6N/A	<u>.</u>
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
7. 15350 SW. 248 ST. HOMESTEAD PL. 3303	32
(Principal office address)	
(SAME)	
(Current mailing address)	
8. FUVRES TRADING AND MANAGEMENT (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) = 500.	<u> </u>
E6 :	
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	一一
Name: GVY CRAIG Office Address: 15350 SW. 248 ST.	15 R
<u> </u>	AHII: 55
HOME STEAD , Florida 33032	ن ن
(City) (Zip code)	31
10. Registered agent's acceptance:	
Having been named as registered agent and to accept service of process for the above stated corporation at the designated in this application, I hereby accept the appointment as registered agent and agree to act in this cap	
further agree to comply with the provisions of all statutes relative to the proper and complete performance of	
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 appli	ication to
the Department of State, by the Secretary of State or other official having custody of corporate records in the jur	isdiction
under the law of which it is incorporated.	

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

A. DIREC	TORS	1	•					
Chairman: _	Guy	Chair	5	· <u>·····</u>				<u></u>
Address:	1535	0 SW.	248	51.	Leme 5	TEAD	FL.	33032
	· · · · · · · · · · · · · · · · · · ·	<u> </u>						
Vice Chairm	an;				<u>*</u>	<u> </u>		
Address:			<u></u>	<u></u>	<u></u>	<u> </u>	,	7
			· · · · · · · · · · · · · · · · · · ·	- · · · · · · · · · · · · · · · · · · ·		<u></u>	<u> </u>	, <u>.</u>
Director:			· · · · · · · · · · · · · · · · · · ·	.4.5		<u> </u>		
Address:						يورة حدر دهرر	<u></u>	
	 				<u> </u>			<u> </u>
Director:	·			<u>, , , , , , , , , , , , , , , , , , , </u>				
Address:		 				<u> </u>		
				<u></u>	·			<u> </u>
B. OFFICI	ERS							
President: _	Buy	CRAI	<u>{</u>			<u> </u>	<u></u>	· ;
Address:	5350	Sw.	248 St.	Home	stead .	FL.		7
		· • · · · · · · · · · · · · · · · · · ·						-
Vice Presider	nt:			<u> </u>			TS.	2
Address:			عمري بنور نص	. <u> </u>		<u> </u>	FE	<u> </u>
				## ## · ·	<u></u>		ASE	5 =
Secretary:	GUY	CRAIC	<u> </u>				- M S.	<u>물 D</u>
Address:	15350	Sw.	2484h S.	t. Hor	nested of	, FC	<u>§33</u>	037
Treasurer: _	Cory	CRAI	<u> </u>	<u> </u>	· · · · · · · · · · · · · · · · · · ·	<u> </u>	DA E	<u></u>
Address:	15350	SW.	248 84.	Hom	estead,	FL_	33(132
NOTE. IF.	2000000000	a decetta (com	an addendum to th	a annlication I	istina additions	l officers and	llan dinaat	
	necessary, you	I may attach s	m addendum to th	e application i	ising additiona	ii officers and	vor atreco	ors.
13.	(Si	gnature of Di	rector or Officer li	sted in numbe	r 12 of the appl	lication)		
14	GUY	CRAIG	PRESIT	DENK S	IGNET TRI	ADING	NCORI	ORATED
	' (Typed or prin	ted name and capa	acity of persor	signing applic	ation)		

Delaware

The First State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SIGNET TRADING INCORPORATED" 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 TWELFTH DAY OF JULY, A.D. 2004.



Darriet Smith Hindson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 3225456

DATE: 07-12-04

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