400004257

(Requestor's Name) (Address) (Address)	200038004042
. (City/State/Zip/Phone #) . PICK-UP WAIT MAIL . (Business Entity Name)	06/25/Ō401065002 **78.75
Certified Copies Certificates of Status Special Instructions to Filing Officer:	FILED 04 JUL 23 PM 4 SELVALIASSEE, FLO

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04 JUL 23 PH 4: 18

SEVALARISE ELFLORIDA

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: ACROBATION WORLDWIDE 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:		
POXANNE JOFFE		
(Name of Person)		
ACROBATIO WORLDWIDE INC (Firm/Company)		
(Firm/Company)		
P.O. BOX 1127		
$\frac{P.0.B0\times117}{\text{(Address)}}$		
MANCHESTER, VT 05254 (City/State and Zip code)		
(City/State and Zip code)		
For further information concerning this matter, please call: SAM SHERW at (804) 361-0779 (Name of Person) (Area Code & Daytime Telephone Number)		
SAM SHERW at (804) 363-0779 (Name of Person) (Area Code & Daytime Telephone Number) STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 Enclosed is a check for the following amount:		
☐ \$70.00 Filing Fee		



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 28, 2004

ROXANNE JOFFE ACROBATIX WORLDWIDE INC. PO BOX 1127 MANCHESTER, VT 05254

SUBJECT: ACROBATIX WORLDWIDE INC.

Ref. Number: W04000024794

We have received your document for ACROBATIX WORLDWIDE INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence, which usually consists of a single sheet of paper and clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence from the same office that provided you with the certified copy.

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) 245-6025.

Trevor Brumbley Document Specialist

Letter Number: 204A00042180

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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. ACROBATIC WORLD WIDE, 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 adopted for the purpose of transacting business in Florida) (State or country under the law of which it is incorporated)

3. (FEI number, if applicable) 5. DERPETUAL

(Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 3928 MAIN ST MANCHESTER, VT OSJSY
(Principal office address) PO BOX (1)7 MANCHESTED, VT 05+54 (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 NOT acceptable) SAM STERN

1345 MAIN ST &D

SARASOTA , Florida 34236
(City) (Zip code) Name: Office Address: 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.
- 12. Names and business addresses of officers and/or directors:

A. DIRECTORS	
Chairman: ROXANNE DIFFE	
Address:	
MANCHESTED , VT 05254	
Vice Chairman:	
Address:	
Addition,	
Director:	
Address:	
•	
Director:	
Address:	
B. OFFICERS	
President: ROX ANNE DIFFE	
Address: P.O. BOX 1127 MANNHESTER	
VT 05254	
Vice President: SAM SHERN	
Address: P.D. BOX 1127	F1L 23
MANCHESTER, UT 05254	PR
Secretary: SAM STERN	£.
Address: P.O.BOX 1127 MANCHESTER, UT 050-54	80F. 80
Treasurer: RUXANUE JOFFE	
as as also many to the office	f
Address: FOO 100x 110 MANOCHESER, 01.0303 9	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and	or directors.
13. Ovolte	
(Signature of Director of Officer listed in number 12 of the application)	
14. PRESIDENT.	
(Typed or printed name and capacity of person signing application)	

STATE OF VERMONT OFFICE OF SECRETARY OF STATE

Certificate of Good Standing

I, Deborah L. Markowitz, Secretary of State of the State of Vermont, do hereby certify according to the records of this office

ACROBATIX WORLWIDE, INC.

a corporation formed under the laws of VERMONT

was filed for record in the office on JULY 2, 2001

I further certify that the corporation has perpetual duration, that its most recent annual report is on file, and that articles of dissolution have not been filed.

JULY 9, 2004

Given under my hand and the seal of the State of Vermont, at Montpelier, the State Capital

Debut Munt

Deborah L. Markowitz Secretary of State

