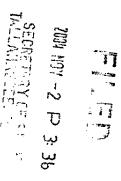
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(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
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(Business Entity Name)						
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Signature

TRANSMITTAL LETTER

то:	Registration Se Division of Co					\ -		
SUBJ	ECT: RE: Bus	siness Forms & Printin	g, Inc.					
		(Name of	corporatio	n - must	include suffix)		
Dear S	ir or Madam:							
"Certif		tion by Foreign Corpo ce," and check are sub orida.						
Please	return all corres	pondence concerning	his matter	to the fo	llowing:			
Richar	d Erckman		,eva - v		<u> </u>	≠ <i>⊭</i>		
			(Name of	Person)				
RE: Bu	ısiness Forms &	Printing, Inc.						
69 Knc	oli Wood Drive		(Firm/Co	mpany)		TALL	700	
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Kissim	mee; FL 34759	<u>-</u>		-		25)¥	Taricus 1
		((City/State a	and Zip c	ode)			
For fur	ther information	concerning this matte	r, please c	all:			الا بر الا	
Richard	d Erckman	at	(863	, 427-	9199			
	(Name of Pers					none Number)		
Enclose	STREET ADI Registration Se Division of Co. 409 E. Gaines : Tallahassee, FI ed is a check for	ection rporations St.	· · · · · · · · · · · · · · · · · · ·		MAILING A Registration of C Division of C P.O. Box 632 Tallahassee,	Section Corporations 27		
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23 \$70	.00 Filing Fee	□ \$78.75 Filing Fe Certificate of S			Filing Fee & ed Copy	(2) \$87.50 f Certific Certifie	ate of S	Status &



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 20, 2004

RICHARD ERCKMAN RE: BUSINESS FORMS & PRINTING, INC. 69 KNOLL WOOD DRIVE KISSIMMEE, FL 34759

SUBJECT: RE: BUSINESS FORMS & PRINTING, INC.

Ref. Number: W04000038646

We have received your document for RE: BUSINESS FORMS & PRINTING, INC. and your check(s) totaling \$70.00. 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) 245-6913.

Letter Number: 904A00060303

Diane Cushing Document Specialist

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.	RE: Business Forms & Printing, 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 na	ıme	adopted for the purpose of transa	eting busir	ness in F	lorida)	
2.	North Carolina_	3.	56-1906427				
	(State or country under the law of which it is incorporated)	_	(FEI number, if	applicable)	!		
4.	January 12, 1995	5.	Perpetual				
	(Date of incorporation)		(Duration: Year corp. will ceas	e to exist o	or "perpe	tual")	
6.							
	(Date first transacted busine (SEE SECTIONS 607,1501 & 60		n Florida, if prior to registration) 502, F.S., to determine penalty lia	ıbility)—			
7.	69 Knoll Wood Drive, Kissimmee, FL 34759				200		
	(Principal office	ado	lress)	- 1 in	- Age	77	
	69 Knoll Wood Drive, Kissimmee, FL 34759			TS TS	=		
	(Current mailing	ado	lress)	FIS	10		
8.	Broker of printed forms				بب س	2)	
	(Purpose(s) of corporation authorized in home state of	or c	ountry to be carried out in state of	Florida)	Ω.	<u> </u>	
9.	. Name and street address of Florida registered agent: (P .0	D. Box <u>NOT</u> acceptable)				
	Name: Richard Erckman						
Oi	Office Address: 69 Knoll Wood Drive, Kissimmee, FL	. 3	4759				
	Kissimmee34759		, Florida N/A	,			
	(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/A	
Address:	
Vice Chairman: N/A	
Address:	•
Director: Richard Erckman	
001/ 111/ 15 1/2 1 - 51 04750	
	5.1
Director:	
Address:	
	LA ROY
D. OEDICEDS	- 10 II
B. OFFICERS	2 - 2 - T
President: Richard Erckman	The Day
Address: 69 Knoll Wood Drive, Kissimmee, FL 34759	W Y
	
Vice President: N/A	
Address:	
Secretary: Laura Erckman	
Address: 69 Knoll Wood Drive, Kissimmee, FL 34759	
Treasurer: Richard Erckman	
Address: 69 Knoll Wood Drive, Kissimmee, FL 34759	
NOTE: If necessary, you may attach an addendum to the application listing	g additional officers and/or directors.
(Signature of Director or Officer listed in number 12 of 12	of the application)
14. Richard Erckman, President	
(Typed or printed name and capacity of person sign	ing application)



NORTH CAROLINA Department of The Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

RE: BUSINESS FORMS & PRINTING INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 27th day of January, 1995, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 6th day of October, 2004

Plaine I. Marshall

Secretary of State