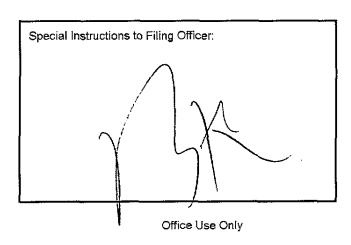
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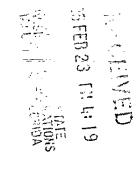
		(Reque	estor's Name)		
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OS APR-7 PH 3:49 E

SPIEGEL & UTRERA, P.A.

(Requestor's Name)

1840 CORAL WAY, 4TH FLOOR

(Address)

MIAMI, FL 33145 (305) 854-6000

(City, State, Zip)

(Phone)

CORPORATION NAM	IE(S) & DOCUMENT NUMBER(S) (il known):
1. Harvel & Asso	ociaks, Inc.
2.	(Coedinato)
	ion Name)
3	
(Corpora	tion Name)
. 4.	don Name) (Document 2)
: X Walk in P	lick up time Certified Copy
Mail out	Will wait Photocopy Certificate of Status
NEW FILINGS	AMENDMENTS
Profit	Amendment
NonProfit	Resignation of R.A., Officer/Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger
	DECISION!
OTHER FILINGS	REGISTRATION/ OUALIFICATION
Annual Report	1
Fictitious Name	Foreign
Name Reservation	Limited Partnership

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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 31, 2005

SPIEGEL & UTRERA, P.A.

TALLAHASSEE, FL

SUBJECT: HARVEL & ASSOCIATES, INC.

Ref. Number: W05000009562

We have received your document for HARVEL & ASSOCIATES, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

Please note that we are also STILL RETAINING your \$70.00 payment.

We are sorry that we are still unable to file your document, but we cannot accept a certificate from the Alabama Department of Revenue.

The certificate of existence that must be submitted with the application is issued by the Alabama Secretary of State's office.

A sample of the Albabama certificate is attached.

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) 245-6914.

Buck Kohr Document Specialist

Letter Number: 605A00022101

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE REGISTER A FO	E WITH SECTION 607.1503, FLORIDA STA REIGN CORPORATION TO TRANSACT BU	TUTES, THE FOLLOWING IS SUBM SINESS IN THE STATE OF FLORIE	MITTERSTO A
1. HARVEL & AS	SOCIATES, INC.	, and the second	
(Enter name of c	corporation; must include "INCORPORATED," 'lorp," "Inc," "Co," or "Corp.")	'COMPANY," "CORPORATION,"	PAY STORY
(If name unavail	able in Florida, enter alternate corporate name add	opted for the purpose of transacting busin	ness in Florida)
2. Alabama			
	under the law of which it is incorporated)	(FEI number, if applicable)	
4 March 13, 200	1 5 Pr	erpetual	and the second s
(Date		Ouration: Year corp. will cease to exist of	3.42.1 3
6 Upon qualifica	tion _		
v. <u> </u>	(Date first transacted business in FI (SEE SECTIONS 607.1501 & 607.1502,		
7, 203 East 3 Stre	et, Suite 201, Sanford, Florida 32771		
	(Principal office address	s)	200 Marie (1) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
the same	_ · _ <u> ·</u>		
·	(Current mailing address	s)	
The Corporation 8. States and of the	n shall engage in any activity or business per ne State of Florida.	mitted under the laws of the United	The state of the s
(Purpose(s) of corporation authorized in home state or count	ry to be carried out in state of Florida)	
9. Name and stree	t address of Florida registered agent: (P.O. B	ox <u>NOT</u> acceptable)	
Name:	Spiegel & Utrera, P.A.	· · · · · · · · · · · · · · · · · · ·	
Office Address:	1840 Southwest 22 Street, 4th Floor	क्का (and distributed and and distributed and and distributed and and distributed and distrib	ल्क्केंग्लाक के एक अपने क्रिकेट केंद्र स्थान
	Miami	, Florida 33145	
	(City)	(Zip code)	A STATE OF THE STA
designated in this further agree to co and I am familiar	ed as registered agent and to accept service of application, I hereby accept the appointment omply with the provisions of all statutes relativith and accept the obligations of my positions of all statutes relativith and accept the obligations of my positions. Spiegel & University P.A.	t as registered agent and agree to activities to the proper and complete perfo	t in this capacity. I
الحمام معدد ا	(Registered agent's signature) Natalia Utrera, Vice-Pres		
11. Attached is a c	ertificate of existence duly authenticated, not	more than 90 days prior to delivery of	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: Derek Lee Harvel	:_EF
Address: 203 East 3 Street, Suite 201, Sanford, Florida 32771	
Vice Chairman:	·=-: *
	_
Director:	عدي. ا
Address:	_ ===:
	. PH
Director:	
Address:	<u></u>
<u> </u>	ماجب ٢
B. OFFICERS	
President: Derek Lee Harvel	ď
Address: 203 East 3 Street, Suite 201, Sanford, Florida 32771	
	<u>. 43 (</u>
Vice President:	Phu
Address:	
Dorok Loo Harvol	
Secretary: Derek Lee Harvel	
Address: 203 East 3 Street, Suite 201, Sanford, Florida 32771	
Treasurer: Derek Lee Harvel	
Address: 203 East 3 Street, Suite 201, Sanford, Florida 32771	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
13. (Signature of Director or Officer listed in number 12 of the application)	w t nut
14. Derek Lee Harvel, President	
(Typed or printed name and capacity of person signing application)	÷. \$2

Nancy L. Worley Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Nancy L. Worley, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporation records on file in this office disclose that Harvel & Associates, Inc. incorporated in Morgan County, Decatur, Alabama on March 13, 2001. I further certify that the records do not disclose that said Harvel & Associates, Inc. has been dissolved.



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

April 5, 2005

Date

Maney X. Harley

Nancy L.Worley

Secretary of State