# F0500002761

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RD5-3161

#### TRANSMITTAL LETTER

TO:	Registration S Division of Co								
SUBJ	ECT:		GRAYM	AR INC.					
		(Na	me of corpo	ration - m	ust include suffix	r)			
Dear S	Sir or Madam:								
"Certif		ce," and check a			orization to Trans r the above refer				
Please	return all corres	pondence conce	rning this ma	atter to the	following:				
			MAR	CELO UB	AL				
			(Nam	e of Perso	n)				
			GRA	YMAR IN	)				
			(Firm	/Company	7)				
			8595 S	.W 152 A	√E #252				
			(A	Address)					
			MIAMI	, FL 3319	3				
			(City/St	ate and Zi	p code)				
For fur	ther information	concerning this	matter, plea	se call:			TALL	2005	
MARC	ELO UBAL		_ at ( 305	) 34	<del>1</del> 7-9133		A.	T.	
	(Name of Pers	on)		ea Code &	k Daytime Telep	hone Number)	SSEE.	2005 MAY 10 PH 12: 38	7
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					
Enclos	ed is a check for	the following a	mount:						
□ \$70	.00 Filing Fee	S \$78.75 Fil Certificat	ing Fee & e of Status		75 Filing Fee & ified Copy		Filing Focate of S	Status &	ķ



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 12, 2005

MARCELO UBAL 8595 S.W. 152 AVE #252 MIAMI, FL 33193

SUBJECT: GRAYMAR INC. Ref. Number: W05000018311

We have received your document for GRAYMAR INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

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 cal (850) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 305A00024822

### 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.

I. GRAYMAR IN	<del></del>			
(Enter name of community "Inc.," "Co.," "Co.	corporation; must include "INCORPO! Corp," "Inc," "Co," or "Corp.")	RATED,'	' "COMPANY," "CORPORATIO	N,"
SHAMAR INC				
(If name unavail	able in Florida, enter alternate corpora	ate name	adopted for the purpose of transacti	ng business in Florida)
2. NEW JERSEY	•	3	16-171 5534	
(State or country	under the law of which it is incorpora	ted)	(FEI number, if app	plicable)
4 1/10	05	5		
	e of incorporation)		(Duration: Year corp. will cease t	o exist or "perpetual")
6,				
J	(Date first transacted by (SEE SECTIONS 607.1501	usiness in & 607.15	Florida, if prior to registration) 02, F.S., to determine penalty liabil	ity)
7 163 ARLINGTO	N DR. FORDS, NJ 08863			
· ·	(Principal of	ffice addr	ess)	
163 ARLINGTO	ON DR. FORDS, NJ 08863			
	(Current mai	iling addr	ess)	<del></del>
8. INVESTMENTS	S			
(Purpose(s	s) of corporation authorized in home st	ate or co	untry to be carried out in state of Fl	orida) Ps 2
9. Name and stree	et address of Florida registered ager	nt: (P.O	. Box NOT acceptable)	CAN SA
Name:	MARCELO UBAL	`	<del></del> ,	FI IAY IAS
Office Address:	8595 SW 152 AVE # 252			FILED 2005 MAY 10 PM 12: 3 SECRETARY OF STATE ALLAHASSEE, FLORID
	MIAMI		, Florida 33193	71. 71. 71. 71. 71. 71.
	(City)		(Zip code)	: 35 31D/
IO Danistana I -			• • •	س جر
	gent's acceptance: ed as registered agent and to accep	nt servic	e of process for the above states	f cornoration at the place
lesignated in this	application, I hereby accept the a	ppointm	ent as registered agent and agre	ee to act in this capacity.
urther agree to co and I am familiar	omply with the provisions of all stowith and accept the obligations of	atutes re f my nos	lative to the proper and complet ition as registered agent	te performance of my dut
= wise jametteur	man una uccepi ine vongunons of	iny pos	mon as regimeren ugent.	
	4			
	mull			
	(Registered agent's sig	gnature)		

- 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:

### STATE OF NEW JERSEY DEPARTMENT OF TREASURY SHORT FORM STANDING

GRAYMAR, INC. 0100938669

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on January 10, 2005.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Shawn Gray 163 Arlington Drive Fords, NJ 08863

Continued on next page . . .

## STATE OF NEW JERSEY DEPARTMENT OF TREASURY SHORT FORM STANDING

GRAYMAR, INC.

IN TESTIMONY WHEREOF, I have

hereunto set my hand and affixed my Official Seal at Trenton, this 18th day of April, 2005

Johnsteine

John E McCormac, CPA State Treasurer