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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2005

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005-149163

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ISOQAR 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:

ANDREW SMITH
(Name of Person)
ISOQAR Inc
(Firm/Company)
24840 BURNED PINE DRIVE, SUITE 5
(Address)
BONITA SPRINGS, FL 34134
(City/State and Zip code)

For further information concerning this matter, please call:

ANDREW SMITH at (239) 947 6980
(Name of Person) (Area Code & Daytime Telephone Number)

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 & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

March 23, 2005

ANDREW SMITH
ISOQAR INC
24840 BURNT PINE DRIVE, SUITE 5
BONITA SPRINGS, FL 34134

SUBJECT: ISOQAR INC.
Ref. Number: W05000014963

We have received your document for ISOQAR INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

The document must have original signatures.

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) 245-6967.

Michelle Hodges
Document Specialist

Letter Number: 105A00019931

**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. ISOQAR 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)

2. Delaware

(State or country under the law of which it is incorporated)

3. 13-3788621

(FEI number, if applicable)

4. 6/14/94

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. 9/1/04

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. ISOQAR Ltd, First Floor, West Point, 501 Chester Road, Manchester, M16 9HU, England

(Principal office address)

ISOQAR Inc, 24840 Burnt Pine Drive, Suite 5, Bonita Springs, FL 34134

(Current mailing address)

8. Provision of Registration Services for ISO 9001, ISO 14001, OHSAS 18001, AS 9100 and BS 7799

(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)

Name:

CT CORPORATION SYSTEM

Office Address:

1200 S. Pine Island Rd

Plantation

(City)

, Florida

33324

(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.

Barbara A Burke

(Registered agent's signature)

BARBARA A. BURKE
SECRETARY ASSISTANT SECRETARY

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:

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A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: DAVID CRUMPTON

Address: ISOVAR LTD, FIRST FLOOR, WEST POINT, 501 CHESTER ROAD,
MANCHESTER, M16 9HU, ENGLAND,

Director: GEORGE MAXWELL,

Address: ISOVAR LTD, FIRST FLOOR, WEST POINT, 501 CHESTER ROAD,
MANCHESTER, M16 9HU, ENGLAND

B. OFFICERS

President: DAVID CRUMPTON

Address: ISOVAR INC, 24840 BURNT PINE DRIVE, SUITES
BONITA SPRINGS, FL 34134

Vice President: GEORGE MAXWELL,

Address: ISOVAR INC, 24840 BURNT PINE DRIVE, SUITES
BONITA SPRINGS, FL 34134

Secretary: GEORGE MAXWELL

Address: _____

Treasurer: GEORGE MAXWELL

Address: _____

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)

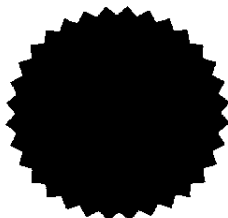
14. DAVID JOHN CRUMPTON
(Typed or printed name and capacity of person signing application)

Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ISOQAR INC." 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 EIGHTEENTH DAY OF FEBRUARY, A.D. 2005.



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 3693373

DATE: 02-18-05