

F05000003725

2005 JUN 21 P 3:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Sender's
Name

RICHARD SCHOCK

Phone

907 758-8443

Company

NEW YORK ACCESSORIES, INC.

Address

12417 EQUINE LANE

City

WELLINGTON

State

FL

ZIP

33414

Dept./Phone/Room



000056290430

(City/State/Zip/Phone #)



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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.

1. NEW YORK ACCESSORIES, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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TALLAHASSEE, FLORIDA

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. STATE OF DELAWARE

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

3. —

(FEL number, if applicable)

4. 9/17/02

(Date of incorporation)

5. "PERPETUAL"

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

6. —

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 7810 N.W. 44TH STREET, SUNRISE, FL. 33351

(Principal office address)

12417 EQUINE LANE, WELLINGTON, FL 33414

(Current mailing address)

8. GENERAL RETAIL

(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:

RICHARD J. SCHACK

Office Address:

7810 N.W. 44TH STREET

SUNRISE

(City)

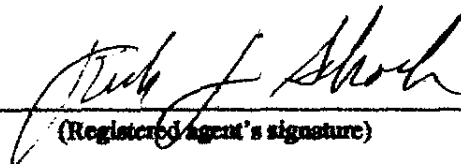
, Florida

33351

(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:

RICHARD J. SCHOCK

Address:

12417 EQUINE LANE
WELLINGTON, FL. 33414

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Vice Chairman:

Address:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Director:

Address:

Director:

Address:

B. OFFICERS

President:

RICHARD J. SCHOCK

Address:

12417 EQUINE LANE
WELLINGTON, FL 33414

Vice President:

Address:

Secretary:

Address:

Treasurer:

Address:

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.

Rich J. Schock
(Signature of Director or Officer listed in number 12 of the application)

14.

RICHARD J. SCHOCK - CHAIRMAN / PRESIDENT
(Typed or printed name and capacity of person signing application)

Delaware

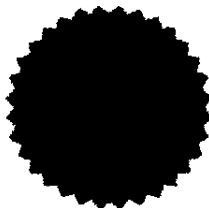
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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NEW YORK ACCESSORIES 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 TWENTIETH DAY OF JUNE, A.D. 2005.

3569591 8300

050511572



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 3962396

DATE: 06-20-05