F05000003765

| | (Requestor's Name) |
|--|--------------------------|
| | (Address) |
| | (Address) |
| | (City/State/Zip/Phone #) |
| PICK-UI | P WAIT MAIL |
| · | (Business Entity Name) |
| | (Document Number) |
| | |
| Certified Copies | Certificates of Status |
| Special Instructions | s to Filing Officer: |
| | |
| | |
| | |
| lame railability | |
| Topument | ு.Office Use Only |
| | - 2 |
| | 2 |
| e a e e e e e e e e e e e e e e e e e e e | t Euri |
| | inti |



200056500702

HBV74705--01832--013 **70.00

SECRETARY OF STATE TALLAHASSEE, FLORICA

105 JUN 29 P 2: 07



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 14, 2005

WHIPSTICK FARM LTD. 77 ELMWOOD RD SOUTH SALEM, NY 10590

SUBJECT: WHIPSTICK FARM LTD.

Ref. Number: W05000029336

We have received your document for WHIPSTICK FARM LTD., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$70.00.

The use of LIMITED or LTD. is not sufficient as a corporate suffix. The name must include a word such as INCORPORATED, INC., CORPORATION or CORP.

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.

Diane Cushing Document Specialist

Letter Number: 105A00041262

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. WHIE; TICK FARIN L+d; Inc. |
| (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," |
| "lnc.," "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. WEW YORK 3. 13-3638571 (State or country under the law of which it is incorporated) (FEI number, if applicable) |
| (State or country under the law of which it is incorporated) (FEI number, if applicable) |
| 4. 11/25/9/ 5. PETUAL (Date of incorporation) 5. (Duration: Year corp. will cease to exist or "perpetual") |
| (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") |
| s |
| (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) |
| |
| (Principal office address) |
| 7. 77 61m WOOD RD SOUTH SOLEM NY 10598 (Principal office address) (Current mailing address) (Current mailing address) |
| (Current mailing address) |
| (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida S.) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) |
| (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) |
| Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable) |
| Name: TRANK CHANIFIE |
| Office Address: 14215 STROLLER WAY WELLINGTON , Florida (Zip code) |
| WELLINGTON, Florida |
| (City) (Zip code) |
| 0. 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.

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:

| Chairman: £42 RBETH CHAMITTE Address: 77 ELIN WOOD RD SOLITH SALLED, NY 10590 Vice Chairman: Address: Director: Address: Characteristic CLI2 RBETH CHARACTER AFT LE CONTROL CONTR | A. DIRECTORS | | | · Names I all Marris |
|--|----------------------------------|---|-----------------------------------|----------------------|
| Vice Chairman: Address: Director: Address: 3. OFFICERS President: LUNDIFF Address: 77 ULM WOOD RU FLOTTH SALCIN MY 10590 FLOTTH SALCIN MY 10590 FLOTTH SALCIN MY 10590 FLOTTH SALCIN MY 10590 Generally: Address: reasurer: ddress: reasurer: ddress: | Chairman: 5212 P.6 | BETH CUNNIFE | | · · · |
| Vice Chairman: Address: Director: Address: 3. OFFICERS President: LUNDIFF Address: 77 ULM WOOD RU FLOTTH SALCIN MY 10590 FLOTTH SALCIN MY 10590 FLOTTH SALCIN MY 10590 FLOTTH SALCIN MY 10590 Generally: Address: reasurer: ddress: reasurer: ddress: | Address: 77 0 | ilmwood RD | | |
| Address: Director: Address: 3. OFFICERS President: Director: Address: Director: Director: Director: Dire | SOUTH | SALUM, NY 16590 | | |
| Address: Director: Address: 3. OFFICERS President: Director: Address: Director: Director: Director: Dire | Vice Chairman: | | F - 100 | |
| Director: Address: Director: Address: 3. OFFICERS President: CALTA BETH CUNNIFFE AND SALUED BY 10590 FFFF D COUTH SALUED BY 10590 FFFF D Address: ddress: ecretary: ddress: reasurer: ddress: | | | | _ |
| Address: Director: Address: B. OFFICERS President: UNNIFF HET UN UNNIF HET UN UNNIFF HET UN UNNIFF HET UN UNNIFF | | | | |
| Address: Director: Address: B. OFFICERS President: UNNIFF HET UN UNNIF HET UN UNNIFF HET UN UNNIFF HET UN UNNIFF | Director: | | | |
| Director: Address: B. OFFICERS President: ULIZ POSTH CUNNIFF Address: 77 ULIN WOAD RD SOUTH SALUED MY 10590 FLOOR SOUTH SALUED MY 10590 Address: Ceretary: conditions: conditions | | | | |
| Address: B. OFFICERS President: 1 | | | - | <u></u> |
| Address: B. OFFICERS President: 1 | Director: | | | |
| President: ULIZ PRETH CUNNIFF ARE JUNI TO SERVE PRESIDENT OF STATE | | | | |
| President: 6212 ABETH CUNNIFFE Address: 77 6211 WOAD RW SET POINTH SALGED NY 10590 Fig. 10 Address: Control of the control | | | | |
| President: 6212 ABETH CUNNIFFE Address: 77 6211 WOAD RW SET POINTH SALGED NY 10590 Fig. 10 Address: Control of the control | B. OFFICERS | | 200 SE | |
| Address: 77 (21) WOOD RD | _ | ETH CHANIFFE | 7 | |
| /ice President: | | | 777.2 | - |
| /ice President: | SOUTH S | ALGO NY 10590 | | |
| address: ecretary: ddress: reasurer: ddress: | | , | RAID O | |
| ecretary: | | | | _ ` |
| ddress: | Addicss. | | | |
| ddress: | Secretary | | | |
| ddress: | | | | |
| ddress: | | | | _ |
| | | | | _ |
| 1 . | | | | |
| OTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. | NOTE: If necessary, you may atta | ach an addendum to the application listing addi | tional officers and/or directors. | |
| 3. <u>//////</u> | 13. | | | _ |
| (Signature of Director or Officer listed in number 12 of the application) | _ | | application) | - |
| 4. <u>CLIZ A BETH CHANTIFE</u> (Typed or printed name and capacity of person signing application) | | | anlication) | |

1/

State of New York Department of State

I hereby certify, that the Certificate of Incorporation of WHIPSTICK FARM LTD. was filed on 12/05/1991, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

The Biennial Statement is past due.

Witness my hand and the official seal of the Department of State at the City of Albany, this 27th day of April two thousand and five.

Secretary of State

200504280351 44