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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 2, 2005

MORRIS LUBETSKY 6427 POINTE PLEASANT CIRCLE DELRAY BEACH, FL 33484

SUBJECT: ALLTRADES INC. Ref. Number: W05000036363

We have received your document for ALLTRADES 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):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

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) 245-6020.

Letter Number: 005A00049759

Tammi Cline Document Specialist

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

TRANSMITTAL LETTER

TO:	Registration Se Division of Co						
SUBJ	ECT:	ALLT	RADES I	NC			
		(Name of corpo	ratio	n - must include suffix)		
Dear S	ir or Madam:						
"Certif		ce", and chec			Authorization to Transact egister the above reference		
Please	return all corres	pondence con	ncerning this m	atter	to the following:		
	<u> </u>	MORRIS	LUBETS	KY_			
_					Person)		
		,	ALL TRAD	ES	INC		
					npany)		_
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170.3	(Name of Person	on)	at (36)	rea C) 488 - 1643 Code & Daytime Telephor	ne Number)	. •
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	ET ADDRESS:				MAILING ADDRESS:		
	ation Section	• •			Registration Section Division of Corporation	1 7 7	
	n of Corporation Gaines St.	15			P.O. Box 6327	2.7	.*
	ssee, FL 32399				Tallahassee, FL 32314	ising to	
Enclose	ed is a check for	the following	g amount:				
5 /\$70.	00 Filing Fee		Filing Fee & cate of Status	٥	\$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee Certificate of Sta Certified Copy	,

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.

•		4	LLTRADI	es inc	<u> </u>	_					
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A	AA i	SHUT;	TERS AN	D KI	CHE	NS, IN	/c				
(If name unava	ailable in l	Florida ent	er alternate con	rporate nam	e adopted	for the pur	pose of				Florida)
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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.

Storen W. Lubetaky, Esquira (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; Mames and dusiness addresses of officers and/or directors:	
A. DIRECTORS	·
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
/ice President:	
Address:	- · · · · · · · · · · · · · · · · · · ·
iecretary: MORRY LUBETSKY	
Address: 6427 Pointe PLEASANT CIRCLE	The second secon
reasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the applic	ration listing additional officers and/or directors
	sation listing additional officers allow directors.
3. (Signature of Director or Officer listed in	number 12 of the application)
4. MORAIS LUBETSKY, P.	
(Typed or printed name and capacity of	person signing application)

COMMON WEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

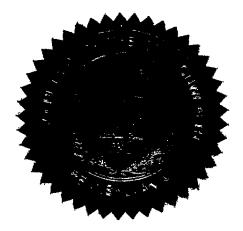
July 21, 2005

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

ALLTRADES, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

43.50

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Secretary of the Commonwealth