## F05000006123

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |

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PLEATANETE FLORIDA





ACCOUNT NO. : 072100000032

REFERENCE : 664255

7115859

Associated by the second secon

AUTHORIZATION :

COST LIMIT : \$ 78.75

ORDER DATE: October 20, 2005

ORDER TIME : 10:39 AM

ORDER NO. : 664255-005

CUSTOMER NO: 7115859

FOREIGN FILINGS

NAME: INGOMAR INC

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX\_\_\_\_ PLAIN STAMPED COPY

XX \_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward -- EXT# 2935

EXAMINER:

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

|  | •   | OA STATUTES, THE FOLLOWING IS SUBMITTED TO CT BUSINESS IN THE STATE OF FLORIDA.  |
|--|---|--|
| 1.   | INGOMAR, INC.   | 100 Cp 17  |
|  | of corporation; must include "INCORPORAT" (Corp.," "Inc.," "Co.," or "Corp.") | ED," "COMPANY," "CORPORATION,"   |
| (If name unav  | ailable in Florida, enter alternate corporate na                              | name adopted for the purpose of transacting business in Florida)   |
| 2. NEVADA  |   | 3 72-1324770   |
|  | ry under the law of which it is incorporated)                                 | _ <sup>**</sup>  |
| 4. MAY 7, 19   | 96  | 5. PERPETUAL   |
|  | ate of incorporation)   | (Duration: Year corp. will cease to exist or "perpetual")  |
| 6.   |   |  |
|  |   | ess in Florida, if prior to registration)<br>07.1502, F.S., to determine penalty liability)  |
| 7. 323 FIFTH   | STREET, EUREKA, CA 95501  |  |
|  | (Principal office   | address)   |
| 323 FIFTH  | STREET, EUREKA, CA 95501  |  |
|  | (Current mailing  | ; address)   |
| CENTEDAT   |   |  |
| 8. GENERAL   | e(s) of cornoration authorized in home state (                                | or country to be carried out in state of Florida)  |
| ` -  | •   | •  |
| 9. Name and <u>st</u>                                  | reet address of Florida registered agent: (                                   | (P.O. Box NOT acceptable)  |
| Name:  | Corporation Service Compan  | i <u>y</u>   |
| Office Address:  | . 1201 Hays Street  |  |
| Office Address.  |   |  |
|  | Tallahassee   | , Florida 32301 (Zip code)   |
|  | (City)  | (Zip code)   |
| Having been no<br>designated in th<br>further agree to | his application, I hereby accept the appo                                     | service of process for the above stated corporation at the place<br>pintment as registered agent and agree to act in this capacity. I<br>tes relative to the proper and complete performance of my duties<br>y position as registered agent. |
|  | Corporation Service Company  By: (Registered agent's signature)               | as its 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:

| A. DIRECTORS  |
|---|
| Chairman: ROBIN P. ARKLEY II  |
| Address: 323 FIFTH STREET   |
| EUREKA, CA 95501  |
| Vice Chairman:  |
|   |
| Address:  |
| Director:   |
| Address:  |
| , red 1990.   |
| Director:   |
| Address:  |
| Address.  |
| B. OFFICERS   |
| President: ROBIN P. ARKLEY II   |
| Address: 323 FIFTH STREET   |
| EUREKA, CA 95501  |
| Vice President: (SENIOR) ALLAN GRUSHKIN   |
| Address: 323 FIFTH STREET   |
| EUREKA, CA 95501  |
| Secretary: ROBIN P. ARKLEY II   |
| Address: 323 FIFTH STREET, EUREKA, CA 95501   |
| Treasurer:  |
| Address:  |
|   |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. |
| 13. Signature of Director or Officer Vistad in purple or 12 of the complication)                                |
| (Signature of Director or Officer listed in number 12 of the application)                                       |
| 14. ALLAN GRUSHKIN, SENIOR VICE PRESIDENT  (Typed or printed name and capacity of person signing application)   |
| / . A L L L   |

SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, INGOMAR, INC., as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since May 7, 1996, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on October 17, 2005.

DEAN HELLER Secretary of State

acqueline urse Certification Clerk

-By

N.V.A.T.