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SECHETARY OF STATE TALLAHORIDA

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TRANSMITTAL LETTER

	egistration Section vivision of Corporations	
SUBJEC	T: DIMBERG MANAGEMENT CORDRANT (Name of corporation - must include suffix)	01
	(Name of corporation - intest include surfix)	
Dear Sir o	or Madam:	
"Certifica	osed "Application by Foreign Corporation for Authorization to Transact Business in Floate of Existence," and check are submitted to register the above referenced foreign corporations in Florida.	
Please ref	turn all correspondence concerning this matter to the following:	
ADEN	NA DIMBERG- WOS-	-36203
	(Name of Person)	/
Dim	BERG MANAGEMENT COR DURATION	
	(Firm/Company)	
780	25 S. HWY AIA	95
	(Address)	5
ME	ELRUURNE BEACH FLA 3295/ 5	
	(City/State and Zip code)	ET
	म् । भ	
For furth	ner information concerning this matter, please call:	STAT
112	CAA Dimarac Pol 777 - 2777 7) (m —)
ANC	(Name of Person) (Name of Person) (Area Code & Daytime Telephone Number)	_ ·
	STREET ADDRESS: Registration Section MAILING ADDRESS: Registration Section	•
	Division of Corporations Registration Section Division of Corporations	
	409 E. Gaines St. P.O. Box 6327	
i	Tallahassee, FL 32399 Tallahassee, FL 32314	
Enclose	ed is a check for the following amount:	
ति ६७०	00 Filing Fee	ling Fee.
/ w/o.		te of Status &



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 1, 2005

ADENA DIMBERG DIMBERG MANAGEMENT CORPORATION 7825 S HWY A1A MELBOURNE BEACH, FL 32951

SUBJECT: DIMBERG MANAGEMENT CORPORATION

Ref. Number: W05000036203

We have received your document for DIMBERG MANAGEMENT CORPORATION and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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) 245-6958.

Lee Rivers Document Specialist

Letter Number: 505A00049571

MMN: 850-2415-6038

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Division of Corporations - P.O. BOX 6327 -Tallaham

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SECINCIANISEE, FLORIDA

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

N COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO	-
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. OF THE STATE OF FLORIDA. OF THE STATE OF FLORIDA.	
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"	
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	
	<u></u>
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
2. TNDIANA 313-16/2/01	<u>-</u> . · · · -
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. (Date of incorporation) 5. (Duration: Year corp. will cease to exist or "perpetual")	÷ * * *
6 (PUN ACCEPTANCE	
6. (Date first transacted business in Florida, if prior to registration)	- -
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	· F : 1 20
1. 7525 SOUTH HUY AIA NIELBURNE BEACH,	-tch sc
AS ABOVE (Principal office address)	-71
(Current mailing address)	
Manacrast	*
8. NANAGEMENT COMPANY (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)	
and a number of	<u></u>
Name: MENH I)III/BEKO	• •
Office Address: 7825 S HW A/A	
MELBURNE BEDCH, Florida 32951	_
(City) (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 designated in this application, I hereby accept the appointment as registered agent and agree to act in this cap	e place pacity, 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	
Uden T	n stran i i i i i i i i i i i i i i i i i i i
(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:

	ORS						
Chairman: _			<u>,</u>				
Address:						<u></u>	
							٠,
Vice Chairma	n:	<u></u>			* * * · ·	·	<u></u>
Address:			<u> </u>		· · · · · · · · · · · · · · · · · · ·		<u></u>
		<u></u> :*	<u> </u>	<u> </u>	<u>.</u>	<u> </u>	<u> </u>
Director:		<u> </u>			<u> </u>	- FG	5
Address:					· · · · · · · · · · · · · · · · · · ·	A SOF	<u> </u>
				<u></u>	<u></u>	ng	是
Director:						- 9	2: -
Address:		<u> </u>	<u></u>	<u> </u>			(1)
_							- <u> </u>
B. OFFIC:	ers BSORN	DIM	135Rg	- A 111			
		DIM South	BEDGY	1111 14.A.	3295/		
President: _	ERS BSORN 7825 MELBON ADENA	DIM South	136119 Hay	A/A.	3295/		
President:	BSORN 7825 MELBOY	DIM SOUTH RNE DIM SOU	136119 Hay	AIII TLA. Yuy	AIA	/	
President: Address: Vice Preside	ERS BSORN 7825 MELBOU 11: ADENA 7825	DIM SOUTH RNE DIM SOU RNE	BEDEN, REEQ	AIII FLA.	A111 3295	7	
President: Address: Vice Preside Address:	ERS BSORN 7825 MELBOU 11: ADENA 7825	DIM SOUTH RNE DIM SOU RNE	BERGIA BERGIA BERGA BERGA BERGA	AIII TLA. TWY FEA	AIA	7	
President: Address: Vice Preside Address: Secretary: _	BSORN 7825 MELBOY 7825 MELBOY BSORN 7825	DIM SOUTH RNE DIM SOU RNE DIM SOUTH	BERGIA BERGIA BERGA BERGA BERGA	AIII TLA. TWY FEA	A111 3295	7	
President: Address: Vice Preside Address: Secretary: _ Address:	BSORN 7825 MELBOY 7825 MELBOY BSORN 7825	DIM SOUTH RNE DIM SOUTH	BERGA BERGA BERGA BERGA HUY	AIII TEA.	A111 3295	7	

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

DIMBERG MANAGEMENT CORPORATION

duly filed the requisite documents to commence business activities under the laws of State of Indiana on July was in existence or authorized to transact business in the State of Indiana on November 01, 2005.

I further certify this For-Profit Domestic Corporation has not filed its most recent report required by Indiana law with the Secretary of State and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this First Day of November, 2005.

TODD ROKITA, Secretary of State

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