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(Re	questor's Name)	
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### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: NANTUCKET	TRIMMING INC.  nust include suffix)
(Name of corporation - m	nust include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Auth "Certificate of Existence", and check are submitted to regist to transact business in Florida.	er the above referenced foreign corporation
Please return all correspondence concerning this matter to the	the following: $WO5-4570$
(Name of Pers	on)
Domare Industries	INTERNATIONAL LOVE
2201 4th Ours.	Whath Esta
LAKE Worth (Address) (City/State and Z	Z 33461-3835 0
(City/State and Z	ip code)
	<del>y</del>
For further information concerning this matter, please call:	
(Name of Person) at (56/) (Area Code	642-6633 × 10 2 & Daytime Telephone Number)
Registration Section Registration of Corporations Div. 409 E. Gaines St. P.O.	ILING ADDRESS: gistration Section rision of Corporations between Box 6327 lahassee, FL 32314
Enclosed is a check for the following amount:	
	.75 Filing Fee & \$87.50 Filing Fee, Certificate of Status & Certified Copy



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 4, 2005

ED OLSOMER BOMAR INDUSTRIES INTERNATIONAL INC. 2201 4TH AVE. NORTH LAKE WORTH, FL 33461-3835

SUBJECT: NANTUCKET TRIMMING INC

Ref. Number: W05000045719

We have received your document for NANTUCKET TRIMMING INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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 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) 245-6958.

Lee Rivers Document Specialist

Letter Number: 105A00060258

## 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. MANTUCISET RIMMING, ————————————————————————————————————
"Inc.," "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. Delaware 3. 01-0829923
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 1/28/05 5. Perpetual
(Date of incorporation) (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)
, 2201 4th Quenue N LAKE WORTH FL 3546
(Principal office address)
SAME AS ABODE
(Current mailing address)
8. <u>Sales &amp; Marketing</u>
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)
Name: Bomare Industries, International, Inc
Office Address: 2201 4th Que North
LAKE Worth, Florida 33461-3835
(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
luties, and I am familiar with and accept the obligations of my position as registered agent.
Colora Ollow
(Registered agent's signature)

(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.

A. DIRECTORS
Chairman: Kyle & Boyle
Address: 2201 4th Quenue North
Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: Kyle G Boyle
President: Kyle G Boyle  Address: 2201 4tt avanue North
Lake Worth, Fr. 33461-3835
Vice President:
Address:
Auditoss.
Secretary:
Address:
Treasurer: EDWARD OISMER  Address: 2201 4th are North Lake Worth, Fr 33461-3835
Address: CEO (11 CEOC ) Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13
(Signature of Director or Officer listed in number 12 of the application)
14. Kyle G. Boyle  (Typed or printed name and capacity of person signing application)

## Delaware

PAGE 1

## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NANTUCKET TRIMMING, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FALL AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTIETH DAY OF DECEMBER, A.D. 2005.

Harriet Smith Windsor, Secretary of State

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4414221

DATE: 12-30-05

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