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SECTION OF STATE ALLAHASSEE, FLORIDA

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COVER LETTER

TO: New Filing Section		
Division of Corporations		
SUBJECT: 3 Crows Corporation		
(Name of corporation - must include suffix)		
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.		
Please return all correspondence concerning this matter to the following:		
David P. Nanney, Jr.		
(Name of Person)		
Kirschbaum, Nanney, Keenan & Griffin, P.A.		
(Firm/Company)		
P. O. Box 19766		
(Address)		
Raleigh, NC 27619-9766		
(City/State and Zip code)		
For further information concerning this matter, please call:		
David P. Nanney, Jr 919 \ 848-0420		
David P. Nanney, Jr. (Name of Person) at (919) 848-0420 (Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS: New Filing Section MAILING ADDRESS: New Filing Section		
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327		
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301		
Enclosed is a check for the following amount:		
\$70.00 Filing Fee \$\bigcup \\$78.75 Filing Fee & \bigcup \\$78.75 Filing Fee & \bigcup \\$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy		

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

		TATUTES, THE FOLLOWING IS SUBMITT	100 S
		BUSINESS IN THE STATE OF FLORIDA.	A T
1. 3 Crows C	Corporation		<u> </u>
(Enter name of corp "Inc.," "Co.," "Corp	poration; must include "INCORPORATED, p," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"	調畫
(If name unavailabl	le in Florida, enter alternate corporate name	adopted for the purpose of transacting business	in Floridate
2. North Car	rolina 3.	(FEI number, if applicable)	
(State or country un	der the law of which it is incorporated)	(FEI number, if applicable)	
4. August 24		perpetual	
(Date of	f incorporation)	(Duration: Year corp. will cease to exist or "p	erpetual")
6			
	(Date first transacted business in (SEE SECTIONS 607,1501 & 607,15	n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
_{7.} 11199 Pol	lo Club Rd., Wellington,	FL 33414	
	(Principal office add	ress)	
11199 Pol	lo Club Rd., Wellington,	FL 33414	
	(Current mailing add	ress)	
_{8.} personal s	services		
(Purpose(s) o	of corporation authorized in home state or co	ountry to be carried out in state of Florida)	
9. Name and street a	address of Florida registered agent: (P.C	D. Box NOT acceptable)	
Name:	Craig T. Galle, Esq.		
Office Address:	11199 Polo Club Rd.	<u>.</u>	
	Wellington (City)	Florida 33414	
-	(City)	(Zip code)	
10. Registered agei			
designated in this ap further agree to com	oplication, I hereby accept the appoints	ce of process for the above stated corporation tent as registered agent and agree to act in elative to the proper and complete performi sition as registered agent.	this capacity. I
	Craigrin,	ele)	
 -	(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:

A. DIRE	CCTORS
Chairman:	
Address:	
Vice Chair	rman:
Address:	
Director:	C. Frazier
-	c/o Craig T. Galle, Esq., 11199 Polo Club Rd. Wellington, FL 33414
Director:	
Address:	
B. OFFI	cers C. Frazier
	c/o Craig T. Galle, Esq., 11199 Polo Club Rd.
	Wellington, FL 33414
-	dent: K. Frazier
	c/o Craig T. Galle, Esq., 11199 Polo Club Rd.
,	Wellington, FL 33414
Secretary:	F. Beal
Address: _	107 Windel Drive, Suite 107, Raleigh, NC 27607
Treasurer:	K. Frazier
	c/o Craig T. Galle, Esq., 11199 Polo Club Rd., Wellington, FL 33414
NOTE: I	f necessary, you may attach an addendum to the application listing additional officers and/or directors.
	(Signature of Director or Officer listed in number 12 of the application)
_{14.} <u>F. I</u>	(Typed or printed name and capacity of person signing application)
	/ 27 L



NORTH CAROLINA Department of The Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, d8 hereby certify that

3 CROWS CORPORATION

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 24th day of August, 2001, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 8th day of February, 2006

Elaine I Marshall

Secretary of State

