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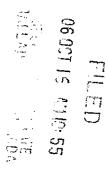
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations							
SUBJECT: Dhoto	Promotio (Name of corpor	ns Iv	1C	<u> </u>	-		_
	(ivaline of corpor	auon - musi	include surrix	.)			
Dear Sir or Madam:							
The enclosed "Application by For "Certificate of Existence," and che transact business in Florida.							0
Please return all correspondence of	oncerning this ma	atter to the fo	ollowing:				
Janet Child	S						
	(Nam	e of Person)					_
Photo Promot	ions I	nc.	-	e de la companya de l			-
	•	/Company)			··············		
157 Rolling	a Meadou	U Dr	ive				
7	/ (A	Address)					
Halliston	MA	6/74	4		É	080	
	(City/St	ate and Zip	code)		# - 1544 # - 1544	<u> </u>	
						5	
For further information concerning	g this matter, plea	se call:				==	Ţ
	_					<u> </u>	
Janet Chi ds (Name of Person)	at (50	18)	439-5	3.33	ŽΞ	C)	
(Name of Person)	(Aı	rea Code &	Daytime Telep	hone Numbe	r)	.	
STREET/COURIER AI New Filing Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301			MAILING A New Filing S Division of C P.O. Box 63: Tallahassee,	Section Corporations 27			
Enclosed is a check for the follow	ing amount:						
	5 Filing Fee & ifficate of Status		Filing Fee & ed Copy	Certi	Filing ficate o fied Co	f Statu	ıs é

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. Photo (Enter name of or "Inc.," "Co.," "Co.	orporation; must include "orp," "Inc," "Co," or "Corp	incorporated,"	"COMPANY," "CORPOR	ATION,"	-
(If name unavaile	able in Florida, enter alterr	nate corporate name ac	lopted for the purpose of tran	nsacting business in Florida)	
2 // 041)	Hanneshire	2	x2 145	2089	
(State or country	under the law of which it i	s incorporated)	02 045 (FEI number,	if applicable)	
1 00	taber 17 1	991 5	-norm+1	10/	
(Date	of incorporation)	11/9/10	Duration: Year corp. will c	ease to exist or "perpetual")	
O	(Date first to (SEE SECTIONS	ransacted business in 1 607.1501 & 607.150	Florida, if prior to registratio 2, F.S., to determine penalty	n) liability)	
7. <i>157</i>	Rolling Mead	Ann Drive Principal office addres	Halliston, M	1A 01746	
50 m	as above	,			
<u> </u>	e as above	Current mailing addre	ss)	<u> </u>	
	of corporation authorized address of Florida regi			ie Easter Santa Fof Florida) SS 8	
Name:	NROI Sur	micas Inc	•		
Office Address:	2731 Execu	tive Park	Drive, Suite		
	Weston (Ci	ty)	, Florida <u>3333</u> (Zip code)	Z 25 55	÷
Having been nam designated in this further agree to co	gent's acceptance: led as registered agent a application, I hereby ac omply with the provision	nd to accept service ccept the appointme ns of all statutes rel	of process for the above nt as registered agent an	stated corporation at the place d agree to act in this capacity. Implete performance of my du	1
	NRAI Services . I	Enc.			
	By: Amy Purdy (Registere	10 U lov	Army Purdy, Assistant	Secretary	
	Appro Dunch . A				

11. Attached is a certificate of existence anistantise analytic 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.

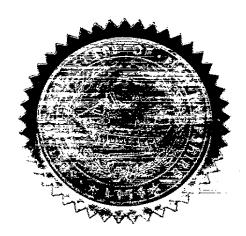
12. Names and business addresses of officers and/or directors:

A. DIRECTORS	
Chairman:	· · · · · · · · · · · · · · · · · · ·
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
Address.	
B. OFFICERS	
President: Janet R. Childs	
President: CVII 103	77
Address: 157 Rolling Meadow Drive. Nolliston MA 01746	
	- 1
Vice President: George L. Childs	5
Address: <u>Same as a bove</u>	
Secretary:	D
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing	g additional officers and/or directors.
13. (Signature of Director or Officer listed in number 12:	of the application)
To all Portion Describe	
(Typed or printed name and capacity of person sign	ing application)

State of New Hampshire Bepartment of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify PHOTO PROMOTIONS, INC. is a New Hampshire corporation duly incorporated under the laws of the State of New Hampshire on October 17, 1991. I further certify that all fees and annual reports required by the Secretary of State's office have been received and that articles of dissolution have not been filed.



In TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 21st day of September, A.D. 2006

William M. Gardner Secretary of State