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#### James M. Grobe, Inc.

December 14, 2006



Florida Department of State Division of Corporations New Filing Section P.O. Box 6327 Tallahassee, FL 32314

RE: Registration of a Foreign Corporation

To Whom It May Concern,

Attached is an original Certificate of Good Standing from the State of Minnesota. In addition, enclosed is a completed application and a check for \$70.00. Please forward the Letter of Acknowledgement to the address within this letter.

Sincerely,

James M. Grobe, President James M. Grobe, Inc.

#### **COVER LETTER**

TO: New Filing Division of	s Section  f Corporations		
SUBJECT:	JA'	NET M. GROO	RE, Juc.
	(Name of corp	oration - must include suffix	x)
Dear Sir or Madam	:		
	lication by Foreign Corporation tence," and check are submitted Florida.		
Please return all co	rrespondence concerning this i	natter to the following:	
	JAMES G	EROBE	
	JAMEZ (Na	me of Person)	
	SAMEZ M	. GQOBE, INCompany)	2.
	(Fir	m/Company)	
7900 X	(exxet ave. So.	,StE 1300, BY	MM, HOTEMING
		(Address)	
	(City/	State and Zip code)	
For further informa	tion concerning this matter, pl	ease call:	
JAME	Person) at (9)	52,942.97	) 등등 kg
(Name of	Person) (	Area Code & Daytime Telep	phone Number)
New Filing Division of Clifton But 2661 Exect	Corporations	New Filing	Corporations 27
Enclosed is a check	for the following amount:		
\$70.00 Filing Fe	e \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

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

(Date of incorporation)  (Date of incorporation)  (Date first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  (Principal office address)  (Principal office address)  (Current mailing address)  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  (Image: James Crost Cost Cost Cost Cost Cost Cost Cost C		JAMES M. GROBE, Inc.
tate or country under the law of which it is incorporated)  (FEI number, if applicable)  (Date of incorporation)  (Date of incorporation)  (Date first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  (Principal office address)  (Principal office address)  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Floridal image and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: JAMES CACBE  (City)  (City)  (Porcess for the above stated corporation at the accept service of process for the above stated corporation at the state of acceptance; ing been named as registered agent and to accept service of process for the above stated corporation at the	Enter name of co nc.," "Co.," "Co	rporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "rp," "Inc," "Co," or "Corp.")
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida, and a street address of Florida registered agent? ACABE  (Purpose(s) of Lakes Hork Plank P		
(Date of incorporation)  (Date of incorporation)  (Date first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  PACO YEXXET PVE. SOUTH, STE 13CC, BLOWINGTON, MN 55431  (Principal office address)  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  Name: JAMES CHORE  Name: JAMES CHORE  108 LAKESHOUR PROVE STG. 1640  Name: JAMES CHORE  (City)  Registered agent's acceptance:  wing been named as registered agent and to accept service of process for the above stated corporation at the	MIL	1NE201A 3.
(Date of incorporation)  (Date first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  PACO X EXXET DVF. SOUTH, STE 13CC, BLOOMINGTON, MN SSASI  (Principal office address)  SAME  (Current mailing address)  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  Name: SAMES CROSE  Name: SAMES CROSE  ice Address: 108 LAKESHOUF DRAVE STG. 1640  [City)  Registered agent's acceptance:  wing been named as registered agent and to accept service of process for the above stated corporation at the		
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  PACO YERXET PVF. SOUTH, &TF 13CC, BLOWINGTON, MN 55481  (Principal office address)  SAME  (Current mailing address)  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: JAMES CROBE  ice Address: 108 LAKESHOUF DRWE STG. 1640  (City)  Registered agent's acceptance:  wing been named as registered agent and to accept service of process for the above stated corporation at the		2-1962 5. PERPETUAL
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  PACO YEXXET PVF. SCUTH, STE 13CC, BLCOWINGTON, MN 55431  (Principal office address)  TO BUSINESS IN THE STATE OF FLOCIDA  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: JAMES CACRE  ice Address: 108 LAKESHONE DRIVE STG. 1640  Name: City)  Registered agent's acceptance:  wing been named as registered agent and to accept service of process for the above stated corporation at the	(Date	
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  PAGO X EXXET DVF. SOUTH, STE 13CC, BLOOMINGTON, MN 55431  (Principal office address)  TO DO BUSINESS IN THE STATE OF FLOCIDA  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: JAMES CROBE  ice Address: 108 Laxes Hone Drave STG. 1640  N. PALM BEACH  (City)  Registered agent's acceptance:  wing been named as registered agent and to accept service of process for the above stated corporation at the		
(Principal office address)  SAME (Current mailing address)  TO DO BUSINESS IN THE STATE OF FLORIDA  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: JAMES CACRE  ice Address: 108 LAKESHONE DRIVE STG. 1640  [City] Florida 38408 (City) (Zip code)  Registered agent's acceptance:  wing been named as registered agent and to accept service of process for the above stated corporation at the		
(Principal office address)  SAME (Current mailing address)  TO DO BUSINESS IN THE STATE OF FLORIDA  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: JAMES CACRE  ice Address: 108 LAKESHONE DRIVE STG. 1640  [City] Florida 38408 (City) (Zip code)  Registered agent's acceptance:  wing been named as registered agent and to accept service of process for the above stated corporation at the	3960 X 8	
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(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: SAMES CROBE  ice Address: 108 Lakes Hone Drave STG. 1646  N. PALM BEACH , Florida 38408  (City) , Florida 28408  (Zip code)  Registered agent's acceptance:  wing been named as registered agent and to accept service of process for the above stated corporation at the		(Current mailing address)
Name: SAMES CAUSE  ice Address: 108 Lakes Hone Orane 876. 1640  N. Palm Beach , Florida 38408  (City) (Zip code)  Registered agent's acceptance:  ving been named as registered agent and to accept service of process for the above stated corporation at the	(Purpose(s	
Name: SAMES CAUSE  ice Address: 108 Lakes Hone Orane 876. 1640  N. Palm Beach , Florida 38408  (City) (Zip code)  Registered agent's acceptance:  ving been named as registered agent and to accept service of process for the above stated corporation at the	Name and stree	address of Florida registered agent: (P.O. Box NOT acceptable)
N. PAUM BEACH, Florida 38408 (City) (Zip code)  Registered agent's acceptance: ving been named as registered agent and to accept service of process for the above stated corporation at the	Name:	DAME! CEITURE
N. WHUM BEACH, Florida 38408 (City) (Zip code)  Registered agent's acceptance: wing been named as registered agent and to accept service of process for the above stated corporation at the	ice Address:	- TOP - STORY W
Registered agent's acceptance: ving been named as registered agent and to accept service of process for the above stated corporation at the		N. PALM BEACH , Florida 38408
ving been named as registered agent and to accept service of process for the above stated corporation at the		(City) (Zip code)
ther agree to comply with the provisions of all statutes relative to the proper and complete performance of nel statutes relat	ving been name ignated in this ther agree to co	ed as registered agent and to accept service of process for the above stated corporation at the pla application, I hereby accept the appointment as registered agent and agree to act in this capacionally with the provisions of all statutes relative to the proper and complete performance of my

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: BLOOMINGTON MM 55431 Vice Chairman: Address: \_ MANUSHINE GROSE MN 55935 GROBE Director: 3240 Fran 40W. S7TH STREET Address: \_\_\_\_ Nrw Yank, NY 10019 **B. OFFICERS** President: JAMES M GRORD XHXXXX AVE SWITH BLCOWNETON, MN 55931 Address: MM 22482 MICHAE Secretary: Address: 40 W. 57TH Frank 32MD FLOOR NEW YORK, NY 16019 Treasurer: \_\_\_

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. (Typed or printed name and capacity of person signing application)

## state of Minnesota

### **SECRETARY OF STATE**

Certificate of Good Standing

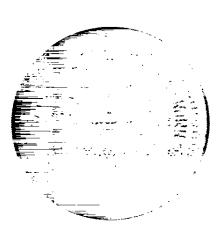
I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: James M. Grobe, Inc.

Date Formed: 06/22/1982

Chapter Governed By: 302A

This certificate has been issued on 11/16/06.



Mary Kiffmager Secretary of State.

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