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PICK-UP WAIT MAIL					
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Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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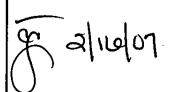
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SECRETARY OF STATE
TALLAHASSEF FLORIDA



COVER LETTER

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TO: **New Filing Section** Division of Corporations SUBJECT: GRUS, INC. (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: MICHAEL WHELAN (Name of Person) c/o GRUS, INC. (Firm/Company) 11430 HAMILTON AVENUE (Address) CINCINNATI, OH 45231 (City/State and Zip code) For further information concerning this matter, please call: at (513) 742-9294 (Area Code & Daytime Telephone Number) MICHAEL WHELAN (Name of Person) STREET/COURIER ADDRESS: **MAILING ADDRESS: New Filing Section New Filing Section Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount: \$78.75 Filing Fee & \$87.50 Filing Fee, \$70.00 Filing Fee **▼** \$78.75 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy

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. GRUS, IN	IC.		•			
(Enter name of c	corporation; must include "INCORPORAT Corp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATIO)N,"		

(If name unavail	able in Florida, enter alternate corporate na	me	adopted for the purpose of transacti	ng busines	s in Flo	orida)
_{2.} OHIO		3.	31-1287633			
(State or country under the law of which it is incorporated)			(FEI number, if applicable)			
_{4.} 12/27/198	88	5.	PERPETUAL			
(Date	of incorporation)		(Duration: Year corp. will cease t	o exist or "	perpet	ual")
6						
	(Date first transacted busine	ss ii	n Florida, if prior to registration) 502, F.S., to determine penalty liabil	l:4\		
_ 380 PARK	C PLACE #100, CLEARWA			ity)		
7. 000 1 7 11 (1)	(Principal office		<u> </u>			
11430 HAI	MILTON AVENUE, CINCIN		,			
	(Current mailing					
··	SKILLED TRADESMEN T				บรา	<u>RY</u>
(Purpose(s	s) of corporation authorized in home state o	rcc	ountry to be carried out in state of Fl	orida)- 😤	07	
9. Name and stree	et address of Florida registered agent: (P.C	D. Box NOT acceptable)		933	and in the
Name:	JONATHAN BAILEY		<u></u>		B 15	
Office Address:	380 PARK PLACE #100			Eng.	==	ΕD
	CLEARWATER		, Florida 33759		Ÿ	
	(City)		(Zip code)	Time (199	56	
10. Registered ag	gent'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 duties, and I am familiar with and accept the obligations of my position as registered agent.

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:						
Address:						
Vice Chairman:						
Address:						
Director:						
Address:	·					
Director:						
Address:	97 ALL					
B. OFFICERS	SE LED					
President: JONATHAN BAILEY) <u>- ا</u> ر ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ					
Address: 380 PARK PLACE #100, CLEARWATER, FL 33759	δ <u>Λ</u>					
Vice President:						
Address:						
Secretary:						
Address:						
Treasurer:						
Address:						
NOTE: If necessary, you may attach an addendum to the application listing additional office. 13. (Signature of Director or Officer listed in number 12 of the application)						
JONATHAN BAILEY, PRESIDENT	,					
(Typed or printed name and capacity of person signing application)						

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

United States of America State of Ohio Office of the Secretary of State

I, Jennifer Brunner, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show GRUS, INC., an Ohio corporation, Charter No. 739569, having its principal location in Cincinnati, County of Hamilton, was incorporated on December 27, 1988 and is currently in GOOD STANDING upon the records of this office.

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SECRETARY STATE



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 14th day of February, A.D. 2007

Ohio Secretary of State

Validation Number: V200742F3B793