# Foldowson 14

| (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



400109448214

09/18/07--01030--001

\*\*70.00

SECRETARY OF STATE ALLAHASSEE, FLORIDA

7001 SEP 18 P 12:3



Central Licensing Bureau, Inc. 1501 NORTH UNIVERSITY

1501 NORTH UNIVERSITY
SUITE 550
LITTLE ROCK, ARKANSAS 72207-5271
www.centralilcensingbureau.com
(501) 664-8044
FAX - (501) 664-6182

GENA BRADSHAW, FLMI Chief Executive Office

W.H.L. WOODYARD IV Chief Operating/Financial Officer

September 12, 2007

Florida Dept. of State Division of Corporations 2661 Executive Center Cr. W Tallahassee, FL 32301

Dear Sir/Madam:

Enclosed, please find the necessary documents to reinstate AUCLAIRRE INTERNATIONAL, INC to do business in your state.

I trust this letter and the enclosed documents place them in compliance with your state Statutes. However, if any further action is required, please do not hesitate to contact me.

Thank you for your consideration of this filing.

Sincerely,

Patricia Torres

Corporate Qualification Division

/pt

Enclosures

SECRETARY OF STATE
TALL AHASSEF. FLORIN

FILED

ुकाम । संबं

Commission of the Commission of the Spiriters

#### **COVER LETTER**

| COVER LETTER                              |   | TALLAHAR TALLAHAR                   |   |
|---|---|-------------------------------------|---|
|   | Filing Section on of Corporations   |                                     | SSEE P O                                    |
| SUBJECT:                                  | AUCLAIRRE INTERNATIONAL, IN   | NC.                                 | £25 55                                      |
|   | (Name of corp   | oration - must include suffix)      | DE O  |
| Dear Sir or M                             | adam:   |                                     | ,   |
|   | "Application by Foreign Corporatio<br>Existence," and check are submitte<br>ess in Florida. |                                     |   |
| Please return a                           | all correspondence concerning this n  | natter to the following:            |   |
| Patricia Torre                            | _   | -                                   |   |
|   | (Na   | me of Person)                       |   |
| Central Licens                            | sing Bureau   |                                     |   |
|   | (Fir  | m/Company)                          |   |
| 1501 N. Unive                             | rsity, #550   |                                     |   |
|   |   | (Address)                           |   |
| Little Rock, AF                           | ₹ 72207   |                                     |   |
| ·   | (City/S   | State and Zip code)                 | · · · · · · · · · · · · · · · · · · ·       |
| For further inf                           | ormation concerning this matter, ple  | ease call:                          |   |
| Patricia Torres                           | . 50  | 01 、664-8044                        |   |
| (Nam                                      | e of Person) at (   | Area Code & Daytime Teleph          | one Number)                                 |
|   |   |                                     |   |
|   | ET/COURIER ADDRESS:   | MAILING A                           | DDRESS:                                     |
|   | iling Section   | New Filing Se                       |   |
| Division of Corporations Clifton Building |   | Division of C                       | •   |
| 2661 I                                    | Executive Center Circle assee, FL 32301   | P.O. Box 632<br>Tallahassee, F      |   |
| Enclosed is a c                           | check for the following amount:   |                                     |   |
| \$70.00 Filin                             | g Fee \$78.75 Filing Fee & Certificate of Status  | \$78.75 Filing Fee & Certified Copy | \$87.50 Filing Fee, Certificate of Status & |

#### 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. AUCLAIRRE INTERNATIONAL, INC. |                   |   |     |  |           |            |          |
|----------------------------------|-------------------|---|-----|--|-----------|------------|----------|
|                                  |                   | corporation; must include "INCORPORAT Corp," "Inc," "Co," or "Corp.") | ED, | " "COMPANY," "CORPORATION,"  |           |            | _        |
|                                  | (If name unavail  | able in Florida, enter alternate corporate na                         |     | adopted for the purpose of transacting b   | usiness i | n Florida) | <u> </u> |
| 2.                               | New Jersey        |   | 3.  | 20-5063252   |           |            |          |
|                                  | (State or country | under the law of which it is incorporated)                            |     | (FEI number, if applica  | ble)      |            | -        |
| 4.                               | 6/14/2006         |   | 5.  | Perpetual  |           |            |          |
| .,                               | (Date             | of incorporation)   | ٠.  | (Duration: Year corp. will cease to ex   | st or "pe | rpetual")  | _        |
| 6.                               | Upon Qualifica    | ition   |     |  |           |            |          |
|                                  |                   |   |     | n Florida, if prior to registration)<br>502, F.S., to determine penalty liability) |           |            | _        |
| 7.                               | 23 Vreeland Ro    | i., #201, Florham Park, NJ 07932                                      |     |  |           |            |          |
|                                  |                   | (Principal office   | add | ress)  | Z S       | ~          | =        |
|                                  | 23 Vreeland Ro    | d., #201, Florham Park, NJ 07932                                      |     |  | ECR       | 2001 9     |          |
|                                  |                   | (Current mailing  | add | ress)  | ¥E<br>ZZ  | ₩<br>₩     |          |
| 8.                               |                   | of insurance, functioning as an insurance                             |     |  | ARY O     | 8          |          |
|                                  | (Purpose(s        | s) of corporation authorized in home state of                         | rcc | ountry to be carried out in state of Florida                                       | ) [(S     | 70         |          |
| 9.                               | Name and stree    | et address of Florida registered agent: (                             | P.C | D. Box NOT acceptable)   | TATE      | LE :3      |          |
|                                  | Name:             | NRAI Services, Inc.   |     |  |           |            |          |
| Office Address:                  |                   | 2731 Executive Park Dr., Ste 4  |     | - N  |           |            |          |
|                                  |                   | Weston  |     | , Florida 33331  |           |            |          |
|                                  |                   | (City)  |     | (Zip code)   |           |            |          |
|                                  |                   | _   |     |  |           |            |          |

#### 10. 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 duties, and I am familiar with and accept the obligations of my position as registered agent.

NRAI Services, Inc.

(Registered agent's signature) Lauri Stone, Asst. Secretary

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:  |                     |          |
| Address:   |                     |          |
|  |                     |          |
| Vice Chairman:   |                     |          |
| Address:   |                     |          |
|  |                     | _        |
| Director: Joel P. Thompson and Caroline E. Thompson  |                     |          |
| Address: 23 Vreeland Rd., #201   |                     |          |
| Florham Park, NJ 07932   |                     |          |
| Director: Christine M. Thompson and Eugene Wilkinson   |                     |          |
| Address: 23 Vreeland Rd., #201   | ZEC<br>TAL          |          |
| Florham Park, NJ 07932   | SEP                 | <u> </u> |
| B. OFFICERS  | 18<br>ARY<br>SSE    |          |
| President: Joel P. Thompson  | E 97 70             |          |
| Address: 23 Vreeland Rd., #201   | Z: 3'               |          |
| Florham Park, NJ 07932   | A Diff              |          |
| Vice President: Caroline E. Thompson   |                     |          |
| Address: 23 Vreeland Rd., #201   |                     |          |
| Florham Park, NJ 07932   |                     |          |
| Secretary: Christine M. Thompson   |                     |          |
| Address: 23 Vreeland Rd., #201, Fiorham Park, NJ 07932   |                     |          |
| Joel P. Thompson   |                     |          |
| Address: 23 Vreeland Rd., #201, Florham Park, NJ 07932   |                     |          |
|  |                     |          |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers          | s and/or directors. |          |
| 13. July 4   |                     |          |
| (Signature of Director or Officer listed in number 12 of the application)  Joel P. Thompson, President |                     |          |
| 14. Typed or printed name and capacity of person signing application)                                  |                     |          |

## STATE OF NEW JERSEY DEPARTMENT OF TREASURY SHORT FORM STANDING

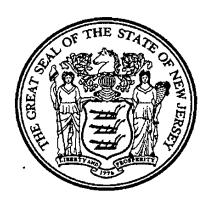
### AUCLAIRRE INTERNATIONAL, INC. 100964519

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on June 14, 2006.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify the registered agent and registered office are:

Corporation Service Company 830 Bear Tavern Rd West Trenton, NJ 08628



Certificate Number: 111187362

Verify this certificate online at

https://www1.state.nj.us/TYTR\_StandingCert/JSP/Verify\_Cert.jsp

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 4th day of September, 2007

Gradley Abelow

Bradley Abelow State Treasurer

2001 SEP 18 P 12: 37