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T. Burch DEC 2.1 2007

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: DELTATRENDS, LAC.
(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:
Name of Person)
(Name of Person)
DELTATREMOS, INC.
(Firm/Company)
+001 14IH AVE 12 2650 MCCORMICK DRIVE #330
(Address)
ST. PETERSBURG, FL 33705 CLEARWATER, FL 33759
(City/State and Zip code)
For further information concerning this matter, please call:
JENNIFER THAVER 1 (727) 729-2699
JENNIFER THAVER at (727) 729-2699 (Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
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 Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1. DELTATEENDS, I.C. (Enter name of corporation, must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," Inc.," "Co.," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida, "Inc.," "Co.," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida, "Inc.," "Co.," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida, "Inc.," "Co.," or "Corp.") (State or country under the law of which it is incorporated) (Part Part Part Part Part (Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, FS., to determine penalty liability) 7. Description of the decrease of the control of the purpose of transacting business in Florida (Principal office address) 20. Holland St. Sute 400 Somerville, MA 0214 (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Fleming Fold Office Address: 2450 Me Cormus Dr. City , Florida 33759 (City , Florida 33759 (City 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.		OMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO ISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	200	
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc.," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida; (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida; (State or country under the law of which it is incorporated) (State or country under the law of which it is incorporated) (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) 7.	1	DELTATRENDS, INC.	7 0	
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida; 2. WASSACHUSETTS 3. OU-329748 (State or country under the law of which it is incorporated) 4. YM Q9 5. PERPETUAL (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) 7. WHOLAND SH SUITE 400 SOME(VILLE, MA 0214) (Principal office address) 20 Holland SH. Suite 400 Some(VILLE, MA 0214) (Current mailing address) 8. Handle business in South Eastern states (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Fleming Ford (City) , Florida 33.759 (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,	(Et	nter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"	21 PH	FILED
(State or country under the law of which it is incorporated) (State or country under the law of which it is incorporated) (FEI number, if applicable) (FEI number, if applicable) (FEI number, if applicable) (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) 7.	(lf	name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida;		
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(Registered agent's signature)	Havi desig furth	ing been named as registered agent and to accept service of process for the above stated corporation at the pla gnated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity her agree to comply with the provisions of all statutes relative to the proper and complete performance of my a I am familiar with and accept the obligations of my position as registered agent.	ty. I	

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 of an octors.	
A. DIRECTORS	· .
Chairman: Ted Kraybill	
Address: 2650 McCormick De #330	
GLEARWATER, IL 33759	
Vice Chairman:	AS 8
Address:	
Director:	新名 2 L
Address:	
	1000 1747 #
	≥ 75°
Director:	, , , , , , , , , , , , , , , , , , , ,
Address:	
B. OFFICERS	
President: Ted KVAYDIII	
Address: Z650 MCCORMICK DR. #330	
CLEARWATTER PL 33759	
Vice President: Flaming Ford	
Address: 2650 MCGBEMICK Dr. #330	Car September
CLENCOUNTER, FL 33759	
Secretary:	·
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may anach an addendum to the application listing additional officers a	and/or directors.
13. Jenus con	
(Signature of Director or Officer listed in number 12 of the application)	
14 FLENING FORD VICE PRESIDENT	
(Typed or printed name and capacity of person signing application)	

Secretary of the Commonwealth

The Gommonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02133

December 18, 2007

TO WHOM IT MAY CONCERN:

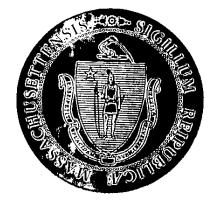
I hereby certify that

DELTATRENDS, INC.

appears by the records of this office to have been incorporated under the General Laws of this Commonwealth on January 1, 1996.

I also certify that so far as appears of record here, said corporation still has legal existence.

SECRETARY OF STATE



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth
on the date first above written.

Secretary of the Commonwealth

Francis Galelin