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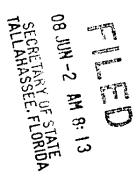
(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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COVER LETTER

TO:	New Filing S Division of C			
CITE!	TECT:	GBH	R CORPORATION	
, WE (1)		The second secon	poration - must include suffi.	x)
Dear S	Sir or Madam:			
*Certi	nclosed "Appli ficate of Existe ct business in I		on for Authorization to Transed to register the above refer	sact Business in Florida," renced foreign corporation to
Please	return all corr	espondence concerning this	matter to the following:	
		GA.	RNET S. BEAN	
		(Na	ime of Person)	
		GBER	CORPORATION	
		(Fi	m/Company)	
		3251	GAMBER ROAD	
			(Address)	
		FINKSBU	RG, MARYLAND 21048	
			State and Zip code)	
or fu	rther informati GARNET S (Name of Pe		ease call: 443) 336-6872 Area Code & Daytime Telep	phone Number)
	(1,2,1,0,0,1,0		The Code & Daytime Telep	mone wantery
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	
inclos	ed is a check fe	or the following amount:		
\$70.	00-Filing Fee	\$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

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. GBHR CORPORATION (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") SAME AS ABOVE (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) STATE OF MARYLAND 3. (State or country under the law of which it is incorporated) 05/27/88 (Date of incorporation) 5. (Duration: Year corp. will cease to exist or "perpetual") MAY 15, 2008 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 3251 GAMBER ROAD, FINKSBURG, MARYLAND 21048 (Principal office address) 1745 LAKE BERRY DRIVE, WINTER PARK, FLORIDA 32789 (Current mailing address) (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: AARON G. BEAN Office Address: 1745 LAKE BERRY DRIVE , Florida (City) 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.

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.

May 27 08 04:49p JAN-26-2004 01:57P FROM:

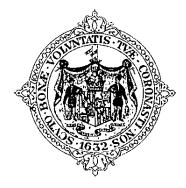
12. Names and business addresses of officers and/or directors:

A. DIRECTORS			
Chairman:	GARNET S. BEAN (SOLE STOCKHOLDER AND DIRECTOR)		
Address:			
 .	3251 GAMBER ROAD, FINKSBURG, MARYLAND 21048		
Vice Chairman:			
Address:			
Director:			
Director:			
Address:			
B. OFFICERS President:	SAME AS LISTED ABOVE		
Vice President:			
-			
Secretary:			
T			
Address:			
. 1-461400-			
NOTE: If nece	essary, you may attach an addendum to the application listing additional officers and/or directors.		
ز	larent S. B.		
~	(Signature of Director or Officer listed in number 12 of the application)		
14. <u>Gar</u>	(Typed or printed name and capacity of person signing application)		
	1.36.00 beautiful and cabacity of betsou signing application)		

STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE. I FURTHER CERTIFY THAT GBHR CORPORATION IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND. IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS MAY 27, 2008.

Paul B. Anderson Charter Division OB JUN-2 AM 8: 13
SECRETARS OF STATE A



301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097