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Office Use Only

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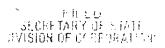


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2009 MAY -5 AH 11:21

or 5/07/09



COVER LETTER

2009 MAY - 5 AM 11: 21

TO: New Filing Section Division of Corporations	
SUBJECT: HANLEY É ASSOCIATES (Name of corporation -	TNTER National INC must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Au "Certificate of Existence," and check are submitted to registransact business in Florida.	
Please return all correspondence concerning this matter to	the following:
DOROTHY LOWRIE (Name of Pe	
(Name of Pe	erson)
HANLEY & ASSOCIATES IN	TERNATIONAL INC
(Firm/Comp	pany)
2338 ImmokaLEE R) oad #104
Hatles Florida 34110 (City/State and	
(City/State and	l Zip code)
`	
For further information concerning this matter, please call	
The state of the s	•
Theorthy Loweiz 31 (230)	821-4907
(Name of Person) at (239) (Area Coo	de & Daytime Telephone Number)
· · · · · · · · · · · · · · · · · · ·	,
STREET/COURIER ADDRESS:	MAILING ADDRESS:
New Filing Section	New Filing Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314
Enclosed is a check for the following amount:	
	78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy



RECEIVED DEPLATMENT OF STATE

09 MAY -5 PH 12: 00

FLORIDA DEPARTMENT OF STATE Division of Corporations

March 12, 2009

DOROTHY LOWRIE 2338 IMMOKALEE ROAD #104 NAPLES, FL 34110

SUBJECT: HANLEY & ASSOCIAIES INTERNATIONAL INC

Ref. Number: W09000011842

We have received your document for HANLEY & ASSOCIAIES INTERNATIONAL INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type ν or carefully print the information in the appropriate blocks.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 109A00008583

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.

(Enter name of co	orporation; must include "INCOI orp," "Inc," "Co," or "Corp.")	INTEL NATIONAL INCORPORATION," "CORPORATION,"	
(If name unavaila	ble in Florida, enter alternate co	rporate name adopted for the purpose of transacting busi	ness in Florida)
<u> </u>			
State or country in	ander the law of which it is incor	rporated) 3. 06-1716 385 (FEI number, if applicable)
1-20-			
	of incorporation)	5. PER PETUAL (Duration: Year corp. will cease to exist	or "perpetual")
·			
	(Date first transact	ted business in Florida, if prior to registration) 501 & 607.1502, F.S., to determine penalty liability)	
30 €			4 34110
·	(Princip	Je + 202 Naples, Florid pal office address)	N SAIO
222	8 Tomakaice	E Road = 204 NAPIES, F	وروح والمائمة
	(Curren	nt mailing address)	WORKE JAI
		-	
l			
(Purpose(s)	of corporation authorized in hor	me state or country to be carried out in state of Florida)	200
. Name and stree	address of Florida registered	agent: (P.O. Box NOT acceptable)	ZOOS MAY
Name:	DOROTHY LOW	دنو	· 当 当 当 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Office Address:	395 Seagrove	LANC#202	75 7
THEC Address,	•		
	Puples	, Florida ₹ 3410 (Zip code)	1:2
	(City)	(Zip code)	\sim a
	ent's acceptance:		
esignated in this	application, I hereby accept t	accept service of process for the above stated corporate appointment as registered agent and agree to a	ct in this capacity.
		all statutes relative to the proper and complete perf ons of my position as registered agent.	ormance of my duti
-	•		
		α	
	V	CA Decidio A	
_	(Registered agent	. 0(00/00)	

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
--	-----	-------	-----	----------	-----------	----	----------	--------	-----------

SEURITARY OF STATE

DIRECTORS	2000	X 1 (1), %
airman: Dorothy Lowrie	2009 MAY -5 AMI	1:22
ress: 395 Seagrove Lane +202		
Maples Florida 34110		
Chairman:		
ress:		
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ector:		
ress:		
rices: Bas Seagrore Lane #202		
Maples FLORIDA 34110		
President:		
ress:		
ctary:		
ress:		
surer:		
ress:		
TE: If necessary, you may attach an addendum to the application listing	ng additional officers and/or direc	rtors
Marry of Lowrie	is additional officers under direct	riors.
(Signature of Director or Officer listed in number 12	2 of the application)	_•
DOPOTHY LOWERE CHAIRMAN.	11	
TIDEDLING CONT. D. C. THIS WA		

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

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HANLEY & ASSOCIATES INTERNATIONAL, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTH DAY OF MARCH, A.D. 2009.

3754291 8300

090236605

AUTHENT (CATION: 7166882

DATE: 03-04-09

You may verify this certificate online at corp.delaware.gov/authver.shtml