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### **COVER LETTER**

TO:	Registration S Division of C					
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Dear S	Sir or Madam:					
"Certi	ficate of Exister		te of Good S	tanding"	and check are sul	act Business in Florida," bmitted to register the
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Enclos	ed is a check fo	r the following am	nount:			
750 \$70 [	0.00 Filing Fee	□ \$78.75 Filii Certificate			75 Filing Fee & fied Copy	S87.50 Filing Fee, Certificate of Status of Certified Copy

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT

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 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) NOATH DAKOTA

(State or country under the law of which it is incorporated)

(FEI number, if applicable) (Date of duration, if ot (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: 9. 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.

(Registered agent's signature)

10. 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.

11. Names and business addresses of officers and/or directors:		
A DIRECTORS .		
Chairman: MAXIA BETH SLHMINT		
1519 / MAI 11		
BY ASEX WI S8523		
Vice Chairman:		
Address:		
Address.		
Director:		
Address:		
Director:		
Address:		
7 total ed 3:		
B. OFFICERS  President: MARLA BETH SCHMINT  Address: LOIS UTAN DA  BISMARCK ND 58503		
Vice President:		·····
Address:		
	17 F	
Secretary:	<u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u>	র্জন <u>ক্রিট্রন</u>
Address:	7	SAN DE LA COMPANSION DE
Treasurer:	=	OF STATE
Address:	2	573 :
NOTE: If necessary you may attach an addendum to the application listing additional officers and		
Signature of Director or Officer  The officer or director signing this document (and who is listed in number 11 above) affirms that it are true and that he or she is aware that false information submitted in a document to the Department a third degree felony as provided for in s.817.155, F.S.	he facts stated	
13. MARLA BETH SCHMIST		
(Typed or printed name and capacity of person signing application)		

# State of North Dakota SECRETARY OF STATE



## CERTIFICATE OF INCORPORATION OF

NORTHLAND TRAVEL INC Secretary of State ID#: 20,038,700

The undersigned, as Secretary of State of the State of North Dakota, hereby certifies that Articles of Incorporation for the incorporation of

### NORTHLAND TRAVEL INC

duly signed and verified pursuant to the North Dakota statutes governing a North Dakota BUSINESS CORPORATION, have been received in this office and are found to conform to law.

**ACCORDINGLY** the undersigned, as such Secretary of State, and by virtue of the authority vested in him by law, hereby issues this Certificate of Incorporation to

### NORTHLAND TRAVEL INC

Effective date of incorporation: September 9, 2004

Issued: September 9, 2004

Alvin A. Jaeger Secretary of State