





FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State

December 20, 1994

SPACE MARK, INC.  
5475 TECH CENTER DR.  
SUITE 210  
COLORADO SPRINGS, CO 80919

SUBJECT: CASM  
Ref. Number: W94000026903

We have received your document for CASM, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$70.00.

The Federal Employer Identification number is comprised of nine digits. Please amend your document accordingly.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please list the street address of each officer/director. If the officer/director does not have a street address, list the mailing address and write (N/A).

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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 (904) 487-6094.

Steven Harris  
Corporate Specialist

Letter Number: 394A00053660

95 FEB - 7 AM 11:15  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

January 5, 1995

SPACE MARK, INC.  
5475 TECH CENTER DR.  
SUITE 210  
COLORADO SPRINGS, CO 80919

SUBJECT: CASM  
Ref. Number: W94000026903

We have received your document for CASM and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Please list the street address of each officer/director. If the officer/director does not have a street address, list the mailing address and write (N/A).

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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 (904) 487-6094.

Steven Harris  
Corporate Specialist

Letter Number: 595A00000366

RECEIVED  
SECRETARY OF STATE  
JAN 11 1995



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

A. DIRECTORS

Chairman: Boris Merculief

Address: 630 West 47th, Apartment B  
Anchorage, AK 99503

Vice Chairman: William Arterburn

Address: P.O. Box 1117 N/A  
Willow, AK 99608

Director: Barbara Roper

Address: P.O. Box 4234 N/A  
Seldotna, AK 99669

Director: Carol Smith

Address: P.O. Box 254572 N/A  
Anchorage, AK 99524

B. OFFICERS

President: Robert P. Bills

Address: 1120 Point of the Pines Drive  
Colorado Springs, CO 80919

Vice President: William C. Hooper

Address: 8530 Smoky Falls Ct.  
Colorado Springs, CO 80920


Secretary: Madeline S. Perry, Secretary/Treasurer

Address: 2130 Westmoreland  
Colorado Springs, CO 80907

Vice President ~~Treasurer~~: Rodney E. Dean

Address: 1145 Allegheny Drive  
Colorado Springs, CO 80919

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.   
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Robert P. Bills, President/CEO  
(Typed or printed name and capacity of person signing application)

95 FEB -3 11:14  
SECRETARY  
DIVISION

Bruce Graham, Director  
2019 Saratoga Avenue  
Anchorage, AK 99517

FILED  
SECRETARY OF STATE  
DIVISION OF PERMITS  
95 FEB - 3 AM 11: 15

State of Alaska  
Department of Commerce and Economic Development  
Division of Banking, Securities and Corporations

CERTIFICATE  
OF  
COMPLIANCE

The undersigned, as Commissioner of Commerce and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby certifies that

**SPACE MARK, INC.**

on **10 17 1990**  
of Incorporation, as a corporation  
State of Alaska.

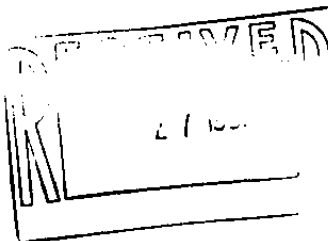
, filed in this office its Articles  
organized under the laws of the

I FURTHER CERTIFY that said corporation has filed all biennial corporate reports due at this time and has paid all biennial corporation taxes and fees due and payable at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.

IN TESTIMONY WHEREOF, I execute this certificate  
and affix the Great Seal of the State of Alaska on  
**01/24/95**

95 FEB -3 10:11:15  
FILED  
DIVISION OF BANKING, SECURITIES  
AND CORPORATIONS



William L. Hensley

COMMISSIONER OF COMMERCE  
AND ECONOMIC DEVELOPMENT