## 1-9500001468

TO: QUALIFICATION/TAX LIEN SECTION DIVISION OF CORPORATIONS

SUBJECT: California Radomes, Inc.		
(Name of corporation	n - must includo suffix)	<del></del>
Dear Sir or Madam:		1195 - 3564
The enclosed "Application by Foreign Florida", "Certificate of Existence", an foreign corporation to transact business	Corporation for Authorization t d check are submitted to regist in Florida.	<b>V</b> -
Please return all correspondence concern	ing this matter to the following:	
Gary Garcia (Name of Pers ————————————————————————————————————	adomes	
364 Reed Str (Address)	•••	
Santa Clara, (City, State and Zip	900001407269 -02/15/9501108007 ****122.50 ****122.50	
Should you need to call someone concern	ing this matter, please call:	
(value of Person)	408 ) 727 - 2847 . Area Code & Daytime Telephone Numb	FILED SION OF CORP HAR 27 PM
COURIER ADDRESS:	MAILING ADDRESS:	STATE CRATTO 3: 24
Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	Qualification/Tax Lien Sec. Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	TE Trons

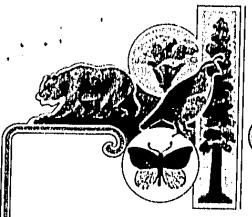
## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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:

1. California Radomen Incorporated (Name of corporation: must include the word "NCORPORATED", "COMPANY", "CORPORATED", "CORPORATED", "CORPORATED", "CORPORATED", "CORPORATED", "CORPORATED", "CORPORATED", "CORPORATED", "CORPORATED", "COMPANY", "CORPORATED", "COMPANY", "CORPORATED", "COMPANY", "CORPORATED", "COMPANY", "CORPORATED", "COMPANY", "CORPORATED", "COMPANY", "CORPORATED", "CORPORATED"	ORATION" or words or stead of a natural person
2. <u>California</u> , <u>USA</u> (State or country under the law of which it is incorporated)  3. <u>94-2866276</u> (FEI number, if applic	ablo)
4. 1983 5. Perpetual (Date of Incorporation) (Duration: Year corp. will cease to	, <u> </u>
(Duration: Year corp. will cease to	exist or "perpetical") முற
6. Upon Qualification (Date first transacted business in Florida, (See eactions 607,1501, 607,1502, and 817,155, F.S.)	
	27 955
7. 364 Reed Street	2 22
Santa Clara, Ca. 95050	SARE
(Current mailing address)	24
8. Aircraft Composite Repair (Radones) (Purposo(s) of corporation authorized in home state or country to be carried out in the 9. Name and street address of Florida registered agent:	o state of Florida)
Name: Gary Garcia	
Office Address: 2325 N.W. 102 Place	
Miami , Florida ,	33172
, riona,	(Zip Code)
40 P 4	(
10. Registered agent's acceptance:	
Having been named as registered agent and to accept service of process a corporation at the place designated in this application, I hereby accept registered agent and agree to act in this capacity. I further agree to comply of all statutes relative to the proper and complete performance of my duties with and accept the obligations of my position as registered agent.  (Registered agent's signature)	the appointment as with the provisions es, and I am familiar
11. Attached is a certificate of existence duly authenticated, not more that delivery of this application to the Department of State, by the Secretary of St having custody of corporate records in the jurisdiction under the law of public	1 A A A A A A A A A A A A A A A A A A A

having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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	Names and addresses of officers and/or directors:	
` <b>A</b> .	DIRECTORS	
	Chairman: Gary Gartea	
	Address: 364 Reed Street	<del></del>
	Santa Clara, Ca. 95050	<del></del>
	Vice Chairman: N/A	
	Address:	
	Director: N/A	<u> </u>
	Addross:	<del></del>
	Director: N/A	<del></del>
	Address:	<del></del>
		SE SIANO
В.	OFFICERS	HAR IDE
	President: <u>Gary Garcia</u>	ARY 27
	Address:364 Reed Street	
	Santa Clara, Ca. 95050	
	Vice President: <u>N/A</u>	
	Address:	
	Secretary: _Michele Pratt	
	Address: 364 Reed Street	<del></del>
	Santa Clara, Ca. 95050	<del></del>
	Treasurer:	<del></del>
	Address:	<del></del>
NOTE: and/or	: If necessary, you may attach an addendum to the application directors.	—— n listing additional officers
13. (Sign	nature of Chairman, Vice Chairman, or any officer listed in auto- 10	
14	GARCIA CILATONIA.	application)
	(Typed or printed name and capacity of person signing application)	



## State of California

SECRETARY OF STATE



## CERTIFICATE OF STATUS DOMESTIC CORPORATION

1, BILL JONES, Secretary of State of the State of California, hereby certify:

That on the _	20th	day of	January		83
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CALIFORNIA RADOMES, INC.

became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

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



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this 16th day of March, 1995

BILL JONES Secretary of State

SEC/STATE FORM CE-112 (REV. 1-05)

94 25218