# F9500003625

TO: QUALIFICATION/TAX LIEN SECTION DIVISION OF CORPORATIONS

50000150095 -07/06/95--01065--001 \*\*\*\*\*78.75 \*\*\*\*\*78.75

W75-13635

SUBJECT: The Outer Edge of Orlando Inc.
(Namo of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

(Name of Person)

The Outer Edge of Orlando Inc
(Firm/Company)

PO Box 549
(Address)

Park Rapids MN 56470
(City, State and Zip Code)

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Should you need to call someone concerning this matter, please call:

Crock at (218) 732-0070.
|(Name of Person) Area Code & Daytime Telephone Number

**COURIER ADDRESS:** 

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 MAILING ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



July 6, 1995

ED STRICKLAND THE OUTER EDGE OF ORLANDO INC PO BOX 549 PARK RAPIDS, MN 56470

SUBJECT: THE OUTER EDGE OF ORLANDO INC

Ref. Number: W95000013635

We have received your document for THE OUTER EDGE OF ORLANDO INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501, F.S., must be set forth in section 6 of the application. If the corporation has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office is required to collect the minimum civil penalty of \$500 for each year other than the application filing year, that a foreign corporation transacts business in this state without authority along with the past annual report fees due this office.)

A brief description of the entity's nature of business must be included in the document.

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 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.

Doug Dickinson Document Specialist

Letter Number: 795A00032788

## 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.	Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION abbreviations of like import in language as will clearly indicate that it is a corporation instead of or partnership if not so contained in the name at present.)	7" or wo	ids or
	or partnership if not so contained in the name at present.)  Minnesofa  State or country under the law of which it is incorporated)  (FEI number, if applicable)		
۱ 4.	(Duration: Year corp. will cease to exist or	"porpot	ual")
	5-25-95 (Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.)	95 E	2000 2000 2000
7.	P.O. Box 549 Park Rapids Minnesota 52470 (Current mailing address)	[ 27 F!! 2:	FILED
8.	(Purpose(s) of corporation authorized in home state or country to be carried out in the state of		ia)
9.	Name and street address of Florida registered agent:		
	Office Address: 437 Fourtanhead Circle #180		
	Eissimmize, Florida, 3	<i>ዛን                                    </i>	<u>:                                    </u>
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.

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

А.	DIRECTORS	
	Chairman:	ED Strickland
		3 BOK 127 A.
	7.00.000.	ick Rapids MN 56470
	•	
	Add10331	
	Director:	
	<del></del> -	
	Director:	
	Address:	
В.	OFFICERS	
	President:	EN Strickland
	_	2 + 3 Box 127A
	<u> </u>	ank Rapids MN 57.470
	Vice President:	
	Address:	
	<u> </u>	
	Secretary:	Carmen Lockhart
	Address:R	t 3 Box 127 A
	<u> </u>	ark Rapids, MN 52470
	Treasurer:	
	Address:	
NOT	E: If necessary, you may atta	ch an addendum to the application listing additional officers
ano/o	or director.	
13.	E/2/	
(t	Signature of Chairman, Vice Chairma	n, or any officer listed in number 12 of the application)
14.	ED Strickle	; ~ <u>d</u>
	(Typed or printed name and capa	city of person signing application)

# state of Minnesota

# **SECRETARY OF STATE**

### Certificate of Good Standing

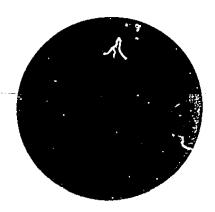
I, Joan Anderson Growe, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is is a listed.

Name: THE OUTER EDGE OF ORLANDO, INC.

Date Formed: 05/24/1995

Chapter Governed By: 302A

This certificate has been issued on 07/19/95.



Joan Anderson Grove Secretary of State.