

August 14, 1995

Qualification/Tax Lien Section Division of Corporations Department of State 409 E. Gaines St. Tallahasso, FL 32399

500001551095 -08/15/95--01103--006 *****70.00 *****70.00

Ro: T/A MARINE INC.

Dear Qualification Section:

Please file the enclosed Application by Foreign Corporation for Authorization to Transact Business in Florida for the above corporation. Also enclosed is our check for the required fees.

Please return the documents to:

CorpAmerica, Inc. ATTN: Michele Hunsiker 1050 S. State St. Dover, DE 19901

If you have any questions or problems with this filing, prease; contact me at 1-800-622-6414.

Sincerely,

Michele L. Hunsiker Customer Service

le J. Hunsi Ken

Enclosures

TRANSMITTAL LETTER

TO: QUALIFICATION/TAX LIEN SECTION DIVISION OF CORPORATIONS

SUBJECT: T/A MARINE INC.	
(Name of corporation -	must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Co Florida", "Certificate of Existence", and foreign corporation to transact business in	orporation for Authorization to Transact Business in check are submitted to register the above referenced Florida.
Please return all correspondence concernin	g this matter to the following:
Michele Hunsiker	
(Name of Person	n)
CorpAmerica, Inc.	
(Firm/Company)	
1050 S. State Str	eet
(Address)	<u> </u>
Dover, DE 19901	
(City, State and Zip Co	ode)
Should you need to call someone concerning	
**************************************	800) 622 _ 6414
(Name of Person) A	rea Code & Daytime Telephone Number
	n de la companya del companya de la companya del companya de la co
COURIER ADDRESS:	MAILING ADDRESS:
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

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 "NCORPORATED", "COMPANY", CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. DE 3. U/A 5 5 5
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4 5-8-98 5. PERTETOAL
(Date of Incorporation) (Ourgidon: Your corp. will cease to exist or "perporual")
c 1)/A
(Outo first transported business in Florids, (See sections 607.1501, 607.1502, and 817.165, F.S.)
10 01000 100
1
653 DIAR ISIE FT. LAURERUHIE TE ITTO
(Current malling address)
Ticling CHAPTERS
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
(Purposate) of corporation authorized at notine stem of country to be carried out in the state of the state
9. Name and street address of Florida registered agent:
\
Name: DEFFREY TOMPKINS
Office Address: 653 Solar ISE
FT. CAUSERCHIE, Florida, 330 (Zio Code)
(Zip Code)
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.
ARegistered agent's stipnature!
/ '' '' '' '' '' '' '' '' '' '' '' '' ''

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.	Namos	and	addresses	of officers	and/or	directors
14.1	14411100	unu	เนนเบออนก	0101110010	ulluloi	01100101

12. Names and addresses of officers and/or directors:
A. DIRECTORS
Chaleman: DEFT TOMPKINS
Address: 4431 DE 3011 AVE
116HT HOUR At. FL 330BY
Vice Chairman: 650866 ARIAN
Addrass: 653 SO(AR 15/E
FT. LANDENDALE, FL. 3330/
Director: RAY SHISER
Address:
FT. LAURENDALS FL 3330/
Director: GEONGE KHSSIS
Address: 350 NE 48 te Ct #402
CIGHTHOUSE Dt. FL 33064
B. OFFICERS ,
President: NEFF TOMPKINS
Address: 443/ N/2 30/1 AVI
Claff House Pt. FL 33004
Vice President: GEONGE ARYAN RAY SUISER
Address: 653 6/48 /s/E
FT. [Audiada/E, FL 3330/
Secretary: 6EDNGE MASSIS
Address: 3050 NZ 48 E4 Cf # 462
LIGHT HOULF Dt. FL 33064
Treasurer: 6EDMaE KAISIS
Address: 3000 NE 48 th Ct. # 402
(16HT fosts At, FL 3306)
NOTE: If necessary, you may attach an addengum 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. CHAIRMAN / PLESIDENT
(Typed or printed name and capacity of person signing application)

State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "T/A MARINE, 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 FOURTEENTH DAY OF AUGUST, A.D. 1995.

Edward J. Freel, Secretary of State

2297090 8300

AUTHENTICATION:

7607840

950184051

DATE:

08-14-95