10000004415

70 Qualification/Tax Lieu Section Division of Corporations

SUBJECT:	Trans Koy Umbrella, Inc. (Name of corporation - must incl	ude suffix)	, , , , , , , , , , , , , , , , , , ,
Dear Sir or l	Madam:		
The enclosed Florida", "Co foreign corp	d "Application by Foreign Corporation for Au ertificate of Existence", and check are submitte oration to transact business in Florida.	thorization to Transe ed to register the ab	act Business in ove referenced
Please return	all correspondence concerning this matter to	the following:	
	Warren G. Craig		
	(Name of Person)		
	Trans Key Umbrella,	Inc.	
•	(Firm/Company)		
	12118 North Loop R	oad	800001582798 -09/12/9501084010 *******************************
	(Address)		
	San Antonio, Texas	78216	
•	(City/State/Zip)		
Should you n	eed to call someone concerning this matter, pl	ease call:	4/12
Warren G.	Craig	t (210) 4	90-8765
	(Name of Person)	(Area Code & Daytime	

COURIER ADDRESS:

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

MAILING ADDRESS:

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

(Area Code & Daytime Telephone Number)

APPLICATION BY FOREIGN CORPORÁTION 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:

abbreviations of i person or partner	ation: must include the word "INCORPOR ike import in language as will clearly indicating if not so contained in the name at pre-	ATED", "COMPANY", "CORPORATION" of a natural sent.)	or words or
2. Dolaward	nder the law of which it is incorporated)	3. 14-2752084 (FEI number, if applicab	le)
4. Jung 14.	1995	5. Porpotual (Duration: Year corp. will cease to exist of	r *nemetial*
		s 607.1501, 607.1502, AND 817.155, F.S.)	• •
		Loop Road	.,
	`an Antonio	о, техав 78216	3 5
· · · · · · · · · · · · · · · · · · ·	(Current mailir	g address)	· •••
9. Name and str acceptable)	cet address of Florida registered	y to be carried out in the state of agent: (P.O. Box or Mail Drop Box	NOT
	Warren Craig		
	Warren Craig 4522 Spruce Street		
	4522 Spruce Street		
Office Address:			

incorporated.

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable) A. DIRECTORS (Street address only- P. O. Box NOT acceptable) Chairman: Warron G. Craiq 4522 Spruce Street Tampa, Florida Address: 33607 Vice Chairman: Address: Director: Address: Director: Address: _____ B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: Warren G. Craig 4522 Spruce Street Address: ____ Tampa, Florida 33607 Vice President: Keith K. Mohan Address: 4522 Spruce Street Tampa, Florida 33607 Secretary: ___James G. Williams Address: 4522 Spruce Street Tampa, Florida 33607 Treasurer: Audrey Garner Address: 4522 Spruce Street Tampa, Florida 33607 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. MABREW CRHIC PRESIDENT
(Typed or printed name and capacity of person signing application)

State of Delaware Office of the Secretary of State

. 1. LDWARD J. FRELL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREITY CERTIFY *TRANS KEYS UNDREELEA, 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 HIRTTETH DAY OF AUGUST, A.D. 1995.





Edward J. Freel, Secretary of State 7625439

AUTHENTICATION:

08-30-95