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Northern Trust Building 400t Tamiami Trail North Suite 250 Naples, Florida 33940

Telephone (941) 262-1202 Facsimile (941) 262-5219 Thomas L. Treadwell Ronald L. Stetler, P.A. Charles P. Erickson, P.A.* Richard D. Cimino, P.A.† David McElrath, P.A.

*Also admitted in South Carolina *Also admitted in Nebruska and Kansas

****131.25 ****131.25

September 22, 1995

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

Re: Pelican Harbor, Inc.

Dear Sir or Madame:

Enclosed please find the Certificate of Existence of Domestic Corporation for the Commonwealth of Kentucky, Transmittal Letter and Application by Foreign Corporation for Authorization to Transact Business in Florida for the above-referenced corporation. Also enclosed is a check in the amount of \$131.25 for the registration fee, certificate of status and a certified copy. Please forward them to me at the above address.

Thank you for your attention to this matter.

Very truly yours,

David McElrath

DM/vis

TRANSMITTAL LETTER

Qualification/Tax Lien Section

Division of Corporations

COURIER ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St

Tallahassee, FL 32399

TO:

SUBJECT: PELICAN HARBOR, INC. (Name of corporation - must include suffix)				
(Name 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:				
DAVID MCELTATH (Name of Person)				
DAVID MCELRATH, P.A. (Firm/Company)				
4001 TAMIAMI TRAIL NORTH #250				
NAPLES, FL 33940 (City/State/Zip)				
Should you need to call someone concerning this matter, please call: 24 (941) Z62-1202				
DAVID McELTCATH at (94), Z62-/Z02 (Area Code & Daytime Telephone Number)				

MAILING ADDRESS:

Taliahassee, FL 32314

P. O. Box 6327

Qualification/Tax Lien Section Division of Corporations

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.	1. PELICAN HARROR, INC.		
	(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" of the import in language as will clearly judicate that it is a corporation instead of a natural	r words	or
	person or partnership if not so contained in the name at present.)	55	ISIVIO 333
2.	2. KENTUCKY (State or country under the law of which it is incorporated) 3. TO BE APPLIED (FE! number, if applicable)	(A) (S)	9% 0~1
4.	4. Auf. 17, 1995 (Date of Incorporation) 5. PERPETUAL (Duration: Year corp. will cease to exist or		نارين ايارن
	6. TO BE DETERMINED, NONE TO DATE (Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)		
	7. 5216 EASTWIND RO.		
	LOUISVILLE, KY 40207 (Current mailing address)		
	(Current mailing address)		
8.	8. FEAL ESTATE DE VELOPMENT + TELLATED (Purpose(s) of curporation authorized in home state or country to be carried out in the state of		
	rionda)		
9.	 Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box acceptable) 	(NOT	
	Name: DAVID MCELRATH		
O	Office Address: 4001 TAMIAMI TRAIL NORTH , #250		
	Office Address: 4001 JAMIAMI TRAIL NORTH , Florida , 33940 10. Registered agent's acceptance:		
10	10. Registered agent's acceptance:		
co re al	Having been named as registered agent and to accept service of process for the above st corporation at the place designated in this application, I hereby accept the appointment registered agent and agree to act in this capacity. I further agree to comply with the proall statutes relative to the proper and complete performance of my duties, and I am familiand accept the obligations of my position as registered agent. (Registered agent's signature)	as visions	s of th
11	11. Attached is a certificate of existence duly authenticated, not more than 90 days prior delivery of this application to the Department of State, by the Secretary of State or of official having custody of corporate records in the jurisdiction under the law of which	her	

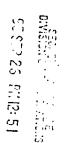
incorporated.

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: J. KINGSLEY STRATTON Address: 5216 EASTWIND ROAD - LANGUILLE, KY. 40207 Vice Chairman: Address _____ Director: JAY K. STRATTEN Address: 1224 EVERETT AVE. LAW SVILLE, KY. 40205 Director: ______ Address: ______ B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: J. KINGSLEY STRATTON Address: 5216 EASTWIND POAR LWISVILLE, KY. 40207 Vice President: Address: _____ Secretary: JAY K. STRATTON Address: 1224 EVERETT AUE. LAUISVILLE, KY. 40205 Treasurer: Address: **NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Charman, Vice Chairman, or any officer listed in number 12 of the application) 14. J. KIUGSLET STRATTON PRESIDENT
(Typed or printed name and capacity of person signing application)



OFFICE OF THE SECRETARY OF STATE

CERTIFICATE OF EXISTENCE DOMESTIC CORPORATION



I, BOB BABBAGE, Secretary of State of the Commonwealth of Kentucky, do		
nereby certify, that according to the records in the office of the Secretary of Sta		
of the Commonwealth of Kentucky, PELICAN HARBOR, INC.		
is a corporation organized and existing under the laws of the Commonwealth of		
Kentucky, whose date of incorporation isAUGUST 17, 1995 ;		
and whose period of duration is PERPETUAL .		
I further certify, that said corporation has paid all fees due and owing to the of-		
fice of the Secretary of State of the Commonwealth of Kentucky to date; has		
delivered to the Secretary of State its most recent annual report, as required by		
KRS 271B.16-220 or 273.3671; and has not filed articles of dissolution.		
IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official		
Seal, at Frankfort, Kentucky, this 12TH day of SEPTEMBER,		
19 <u>95</u> .		

BOB BABBAGE Secretary of State

Commonwealth of Kentucky

KB