

# THE COMPANY CORPORATION

Three Christ Church • 101 N. Palm Street • Washington, D.C. 20001 • Telephone: (202) 75-0440 • Fax: (202) 75-1346

September 29, 1995

100001603651  
-10/09/95--01019--008  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Corporate Records Bureau  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: MHM Orlando Inc.  
9509052538710

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
55 OCT -5 PM 4:13

Dear Sir or Madam:

Enclosed please find Application for Authority (and related documents, if appropriate) and our check in the amount of \$70.00 for MHM Orlando Inc.

Please file and return all related correspondence to my attention at the address listed above.

Please feel free to contact me directly at 1-302-575-0440, ext. 7003, with questions regarding the enclosed application.

Sincerely,

*Vickie Joyner*

Vickie Joyner  
Corporate Service Representative

enc.

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

**IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS  
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACTION BUSINESS IN THE  
STATE OF FLORIDA:**

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 OCT 5 PM 4:13

1. MHM Orlando Inc.  
(Name of corporation: must include the word "INCORPORATED", "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. Delaware 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. Sep 5, 1995 5. perpetual  
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Sep 25, 1995  
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 617.155, F.S.))
7. 20405 Maxim Pkwy  
Orlando, FL 32833  
(Current mailing address)
8. Vending and any lawful act or activity for which corporations  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)  
may be organized
9. **Name and street address of Florida registered agent:**  
Name: Larry Wolfe  
Office Address: 200-A John Knox Road  
Tallahassee, Florida, 32303-6643  
(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.*

see attached  
(Registered agent's signature)

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: (Street address ONLY- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: Peter Keller

Address: Murillo 287

Santa Cruz, Bolivia

Vice Chairman: Barbara Keller

Address: 20405 Maxim Pkwy

Orlando, FL. 32833

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: Peter Keller

Address: Murillo 287

Santa Cruz, Bolivia

Vice President: Barbara Keller

Address: 20405 Maxim Pkwy

Orlando, FL 32833

Secretary: Barbara Keller

Address: 20405 Maxim Pkwy


Orlando, FL 32833

Treasurer: Peter Keller

Address: Murillo 287

Santa Cruz, Bolivia

NOTE: If necessary, you may attach an addendum 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)

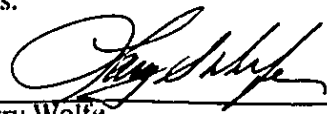
14. Peter Keller  
(Typed or printed name and capacity of person signing application)

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR  
THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON  
PROCESS MAY BE SERVED.

In compliance with Section 607.1507, Florida Statutes, the following is  
submitted:

First, this MHM Orlando Inc.  
desiring to organize under the laws of the state of Florida with its principal place of  
business located in the city of Orlando, State of  
Florida, has named Larry Wolfe located at 200 - A John Knox Road, Tallahassee FL  
32303-6643 as its agent for service of process within Florida.

Having been named to accept service of process for the above stated  
corporation, at the place designated in this Certificate, I hereby agree to act in this  
capacity, and I further agree to comply with the provisions of all statutes relative to  
the proper and complete performance of my duties.

  
Larry Wolfe

9/28/95  
Date

State of Delaware

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Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MMH ORLANDO 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 TWENTY-NINTH DAY OF SEPTEMBER, A.D. 1995.

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
55 Aug -5 PM 4:13



*Edward J. Freel*

Edward J. Freel, Secretary of State

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950224137

AUTHENTICATION: 7659220

DATE: 09-29-95