F990005463

TO: QUALIFICATION/TAX LIEN SECTION DIVISION OF CORPORATIONS

SUBJECT: RADE FRANCE (ISA LID

_	(Name of corpora	ation - must include suffix)	**	- 11/40	
Dear Sir or Ma	dam:		W95-	200	
Florida", "Cer	"Application by Forei tificate of Existence", ation to transact busine	gn Corporation for Aut and check are submittess in Florida.	thorization to	Transact B	usiness in referenced
Please return a		erning this matter to th			
•	(Name of ANOC ANOCO AND LAS)	mpany) Som Slatz	- 2	T1U/24/35-	1618075 -01010015 5 +*++*78.75
	(City, State and	KNY /"	<u> </u>	11/1	
Junie		cerning this matter, ple at (<u>2/2) 758</u> Area Code & Daytime T	8330.	er	

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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 24, 1995

JUNIE PETITNOEL TRADE FRANCE USA LTD 247 EAST 50TH STREET NEW YORK, NY 10022

SUBJECT: TRADE FRANCE USA LTD

Ref. Number: W95000021190

We have received your document for TRADE FRANCE USA LTD 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 use of LIMITED or LTD. is not sufficient as a corporate suffix. The name must include a word such as INCORPORATED, INC., CORPORATION, CORP., COMPANY, or CO.

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 is 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) 487-6958.

Lee Rivers — Document Examiner

Letter Number: 795A00047777

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.	- MILLE THERE IN AN OF INCORPORTE
	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.)
	State or country under the law of which it is incorporated) 3. 3-533756
4.	(FEI number, if applicable)
	(Date of Incorporation) 5. Perpetual
6.	MON DINE Plan
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.)
7.	21/1 10.1 5 9 STREET
	NEW PORK, NY 10:22
	(Current mailing address)
3	INTERIOR SECURALINA
	(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9.	Name and street address of Florida registered agent:
	Name: CRISTINA MCRINIERE
	Office Address: 227 CHWCIII. 2 2010
	11/05/ /4/14 3 +ACH , Florida, 33/01
	(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.

(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.

Names and addresses of officers and/or directors: (St.met address ONLY- P. O. Box NOT acceptable) 12. DIRECTORS (Street address only- P. O . Box NOT acceptable) Α. Chairman: _____ Address: Address: _____ Director: ___ Address: ___ Address: ___ B.OFFICERS (Street address only- P. O. Box NOT acceptable) . President: JEAN CHAPLES MORINICAE Address: 247 6051 50 M STREET New Year, NY 12022 Vice President: Address: _____ Secretary: _____ Address: Treasurer: Address: 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) (Typed or printed name and capacity of person signing application)

State of New York Department of State

I hereby certify, that the certificate of incorporation of TRADE FRANCE - U.S.A., LTD. was filed on 10/17/1984, with perpetual duration, and that I have made a diligent examination of the index of corporation papers filed in this Department for a certificate, order, or record of a dissolution, and upon such examination, I find no such certificate, order or record, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

Witness my hand and the official seal of the Department of State at the City: of Albany, this 15th day of May one thousand nine hundred and ninety-five.

Alexander F. Treacholl

Secretary of State

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