Qualification/Tax Lien Section **Division of Corporations** 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. 800001653288 -12/05/95--01064--022 \*\*\*\*\*70.00 \*\*\*\*\*70.00 Please return all correspondence concerning this matter to the following: X12-60 BOCA RATON FL Should you need to call someone concerning this matter, please call:

### **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

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607. ISO3. FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. WASIX REALTY CORPORATION OF WORDS OF COMPANY CORPORATION OF WORDS OF
(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. KENTULK / (State or country under the lawfolf which it is incorporated)  3. 6/-60793/4  (FEI number, if applicable)
V (PEI IMMER, is dynamic)
4. My 3. 1955  S. PER PETUAL  (Duration: Year corp. will cease to exist or "perpetual")
6. NOVEMBER 17, 1995  (Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)
7. 6634 NW 25 WAY
BOCA RATON FL. 44396
(Current mailing address)
8. DUNGIZSHIP AND RENTAL OF REAL ESTATE
(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: (P.O. Box or Mail Drop Box NOT acceptable)
Name: FUINT, WASSERMAN
Office Address: 6634 NW V5 WAY
BOCA RATON, Florida, 44396
10. Registered agent's acceptance: (Zip Code)
Having been named as registered agent and to accept service of process for the above staied 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.

incorporated.

17 None and the second of the
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 N()T acceptable)
Chairman: TRUIN L. WASS FRANK
Address: 6634 NW V5 LIAX BOCARATON FL. 44391
Address: 6634 NW YS LIAX BOCARATON FL. 44390 Vice Chairman: JEANNE S. WASSERYAN Address: 6634 NW XT WAY, BOCA RATON FL 44390
Address: 6634 NW XT WAY, BOLD RATON FL 443G
7) 3333 133123 (3.7.5)
Director: IZUIN L. WASSERMAN
Address:
Director: JEANNE S. WASSERMAN
Address:
B. OFFICERS (Street address only- P. O. Bex NOT acceptable)
President: IRUIN K. WASSERMAN
Address: U
Vice President:
Address:
Secretary: JEANNE S. WASSERMAN
Address: M
Treasurer:
Address:
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. TRUIN L. WASSERMAN. PRESIDENT
(Typed or printed name and capacity of person signing application)

003-1995 113978 95-357635 088 8989 Pa 137



OFFICE OF THE SECRETARY OF STATE

# CERTIFICATE OF EXISTENCE DOMESTIC CORPORATION

SECRETARY DE SINTE DIVISION DE PHILE: 15-

I, BOB BABBAGE, Secretary of State of the Commonwealth of Kentucky, do hereby certify, that according to the records in the office of the Secretary of State of the Commonwealth of Kentucky, <u>WASIX REALTY CORPORATION</u>
is a corporation organized and existing under the laws of the Commonwealth of
Kentucky, whose date of incorporation is;
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 <u>16TH</u> day of <u>OCTOBER</u>, 19 <u>95</u>.

BOB BABBAGE Secretary of State Commonwealth of Kentucky

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16