

F96 000001149

TO: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: KAMIS INVESTMENTS INC.
(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:

Steven C. Kamis
(Name of Person)

Kamis Investments Inc.
(Firm/Company)

P.O. Box 15484
(Address)

Tampa / FL / 33684-5484
(City/State/Zip)

Should you need to call someone concerning this matter, please call:

Steven C. Kamis at (813) 932-4677
(Name of Person) (Area Code & Daytime Telephone Number)

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

11/16/84 (10/81)
QUALIFICATION/TAX LIEN SECTION
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA 32314
RECEIVED
CORPORATION SECTION
NOV 16 1984

JL



FLORIDA DEPARTMENT OF STATE
Bandra H. Northam
Secretary of State

January 6, 1998

STEVEN C. KAMIS
KAMIS INVESTMENTS, INC.
PO BOX 16484
TAMPA, FL 33684-5484

SUBJECT: KAMIS INVESTMENTS INC.
Ref. Number: W9600000081

We have received your document for KAMIS INVESTMENTS INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list your Federal Employer Identification Number in the appropriate block. If applied for, enter "applied for", or if not applicable, enter "N/A".

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) 487-6093.

Freta Lott
Corporate Specialist Supervisor

Letter Number: 596A00000130

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION
TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1501, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE
STATE OF FLORIDA:

1. KAMIS INVESTMENTS 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 of present)

2. Delaware

(State or country under the law of which it is incorporated)

3. 59-3310154

(FEI number, if applicable)

4. March 23, 1995

(Date of Incorporation)

5. Perpetual

(Duration Year corp will cease to exist or "perpetual")

6. March 23, 1995

(Date first transacted business in Florida (SEE SECTIONS 607.1501, 607.1502, AND 617.135, F.S.))

7. P.O. Box 15484

Tampa, FL 33684-5484

(Current mailing address)

8. Equity Investments and any lawful act or activity for which corporations may be
(Purposes) of corporation authorized in home state or country to be carried out in the state of Florida organized.

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: Steven C. Kamis

Office Address: 8720 N Himes Ave #703

Tampa

, Florida, 33614

(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.

SA
(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: Steven C. Kamis

Address: 8730 N Himes Ave #203 Tampa FL 33614

Vice Chairman: Aaron T. Fair

Address: 8730 N Himes Ave #203 Tampa FL 33614

Director: Dr. Mark Wilson

Address: 18414 Timberlan Dr

Lutz, FL 33549

Director: _____

Address: _____

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

President: Steven C. Kamis

Address: 8730 N Himes Ave #203

Tampa FL 33614

Vice President: Aaron T. Fair

Address: 8730 N Himes Ave #203

Tampa FL 33614

Secretary: Aaron T. Fair

Address: 8730 N Himes Ave #203

Tampa FL 33614

Treasurer: Aaron T. Fair

Address: 8730 N. Himes Ave. #1703 Tampa, FL 33614

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. Steven C. Kamis President & CEO
(Typed or printed name and capacity of person signing application)

State of Delaware
Office of the Secretary of State

Page 1

[Faint, illegible text, likely a certificate or official document]

2/11/19
66102-6 01/16/53
NOTARIAL SEALS DIVISION



Edward J. Friel

Edward J. Friel, Secretary of State

AUTHENTICATION
DATE