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Stripen Films LtD. Inc.
(Name of corporation - must include sullix)

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COURIER ADDRESS:

TO:

Dear Sir or Madam:

Qualification/Tax Lien Section

Division of Corporations

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

Walk-IN 3/22

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

March 7, 1996

NICHOLAS P. CHRISTY, JR. STRIPER FILMS, LTD. 8 PETER COOPER RD. #5H NEW YORK, NY 10010

SUBJECT: STRIPER FILMS, LTD. Ref. Number: W96000005134

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SECRETARY OF STATE DIVISION OF CORPORATION

We have received your document for STRIPER FILMS, 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, CORE, COMPANY, or CO.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has fiot been specified.

The date first transacted business in Florida within the meaning of s. 607.150 for 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

A brief description of the entity's nature of business must be included in the document.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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) 487-6095.

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RECEIVE

Jennifer Sindt Document Examiner

Letter Number: 496A00010306

SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MBR 22 MBH 21

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. STRIPEVL FILMS Ltd. "Inc." (Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or was 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.)	rords o	r
2. DEW YORK (State or country under the law of which it is incorporated) 3. 13-3746973 (FEI number, if applicable)		
4. 12/14/93 (Date of Incorporation) 5. "PERPETUAL" (Duration: Year corp. will cease to exist or "proceedings of the first transacted business in Florida. (See Sections 607.1501, 607.1502, AND 817.155, F.S.)	erpetua	l")
	96 HAR	DISTAIG
7. 8 PETER COOPER RD # SH	2 2	1 C C
DEUD YORK, DEUD YORK 10010 (Current mailing address)	AH II:	Y OF SI
8. Product telesiston connecteds (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)	: 36 —	ATE ATIONS
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box Nacceptable)	<u>TO</u>	
Name: C T Corporation System		
Office Address:1200 South Pine Island Road		
Plantation , Florida , 33324 (Zip Code)		
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 provise all statutes relative to the proper and complete performance of my duties, and I am familiar and accept the obligations of my position as registered agent.	ions o	ſ
CONNIE BRYAN Constant Group Assistant Group Assistant Group (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) Address: _____ Vice Chairman: Address: Director: _____ Address: Director: ___ Address: _____ B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: NICHOLAS P. CHRISTY, JR. Address: 8 PETER COOPER RD #5H DEWYORK, DY 10010 Vice President: NONE Address: ____ Secretary: NICHOLAS P. Christy Tr. Address: 8 Peren Cooper RD NIW JUTH NY 10010 Treasurer: ___ ルッ・ュモ 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. NICHOLAS P. CHRISTY, TO. Pusion of Company of Person signing application)

State of New York Department of State

I hereby certify, that the certificate of incorporation of STRIPER FILMS, LTD. was filed on 12/14/1993, 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.

The Statement of Addresses and Directors is past due.

I further certify, that no other certificates have been filed by such corporation.

Witness my hand and the official seal
of the Department of State at the City
of Albany thits 01st day of March
one thousand nine hundred and
ninety-six

MIEN Secretary of State

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
OF MAR 22 MAIL: 35