TO: Qualification/l'ax Lien Section Division of Corporations	ሷ ተጋቤ መርሰብን ሲጠንሚነው መደደ ማህ ነ -በ4/2/3/35በ106 /009 ትሐቀቀስያር, ዕህ - ትትክቀስያር ወር
SUBJECT: Aviator Ales I (Name of corporation - must include	ne.
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:	
Andrea Reine	<u> </u>
Avicitor Mes Inc.	
8800 Encharted way SE (Address)	
Turner or 9-	1392
Should you need to call someone concerning this matter, please call: Andrew Reimer at 503 588-9463 (Name of Person) (Area Code & Daytime Telephone Number)	
Qualification/Tax Lien Sec. Qualification of Corporations Divisi 409 E. Gaines St P. O. 1	ING ADDRESS: ication/Tax Lien Section on of Corporations Box 6327 assee, FL 32314

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLURIDA

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. Avia for Ales Inc. (Name of cognitation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbaylations 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 (State or country under the law of which it is incorporated) (12/28/95 original 4. 4/11/96 attached Certificate 5. Derpetual (Date of Incorporation) (Date of Incorporation) 3. 9/-/103349/ (PEI number, if applicable) (Duration: Year corp. will cease to exist or "perpetual")	
6. None to date (Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.) 7. 14316 NE 2035d St.	
Woodinville, WA 98072. (Current mailing address)	
8. Manufacturer of Mali Beverage - Ales (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: Mark Anderson Office Address: 1736 S. Hiawassee Rd #33 & CONTROL OF CONTROL (Zip Code) 328352 CONTROL (Zip Code) 32	
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.

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: James W. Bernau Rd SE Address: _ Turner. Address: Director: Address: Director: Address: See addendum B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: Address: Vice President: Address: tdale Rd SE 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) S. W. Bernau President (Typed or printed name and capacify of person signing application) ames

Addendum Board of Directors centinued Aviator Ales, Inc.

Director:

Howard Lovering 4615 NE 54th St Seattle, WA 96105

Address:

Director: Address:

David McCray 6815 Riploy Lano N Renton, WA 98056

Director: Address: Bonnie Pladson 15429 SE 47th Pl Bollevuo, WA 98006

State of Delaware

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AVIATOR ALES, 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 ELEVENTH DAY OF APRIL, A.D. 1996.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

SECRETARY OF STATE
DIVISION OF CORPORATIONS

Edward J. Freel, Secretary of State

AUTHENTICATION:

7904114

05148

DATE:

04-11-96

2377974 8300