

F96000003432

TRANSMITTAL LETTER

TO: Qualification/Tax Lien Section
Division of Corporations

80000188588
-07/05/96--01099--011
*****78.75 *****78.75

SUBJECT: Starline Mfg. 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:

Sofia Komarnycky

(Name of Person)

Starline Mfg. Inc.

(Firm/Company)

4282 S.E. 43rd St. Kings Bay

(Address)

Okeechobee, FL 34974

(City/State/Zip)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 JUL -5 AM 11:47

LR
7/8/96

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

Sofia Komarnycky
(Name of Person)

at (941) 467-1323 or
518) 664-6639
(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

**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. Starline Mfg. 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 at present.)
2. New York
(State or country under the law of which it is incorporated)
3. 14-1569443
(FEI number, if applicable)
4. July 28, 1975
(Date of Incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. WHEN AUTHORIZED TO TRANSACT BUSINESS
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.135, F.S.))
7. P.O. Box 4331
Halfmoon, NY 12065-0852
(Current mailing address)
8. Any legal or lawful activities
(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: Sofia Komarnycky

Office Address: 4282 S.E. 43rd St. Kings Bay
Okeechobee, Florida, 34974
(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.

Sofia Komarnycky
(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.

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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: Bohdan Komarnycky

Address: 163 Route 146

Halfmoon, NY 12065

Vice Chairman: _____

Address: _____

Director: Bohdan Komarnycky

Address: 163 Route 146

Halfmoon, NY 12065

Director: _____

Address: _____

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

President: Bohdan Komarnycky

Address: 163 Route 146

Halfmoon, NY 12065

Vice President: _____

Address: _____

Secretary: Sofia Komarnycky

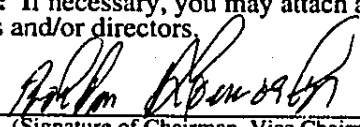
Address: 163 Route 146

Halfmoon, NY 12065

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.  CHAIRMAN
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Bohdan Komarnycky, Chairman
(Typed or printed name and capacity of person signing application)

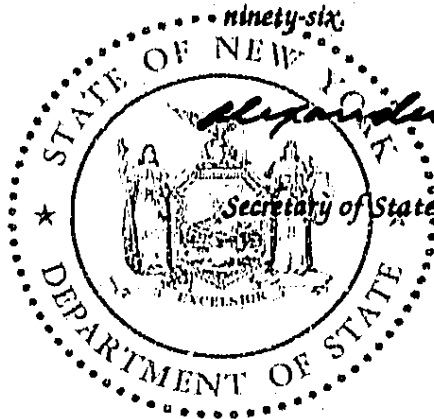
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**State of New York
Department of State**

ss:

I hereby certify, that the certificate of incorporation of STARLINE MFG., INC. was filed on 07/20/1975, 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 21st day of June
one thousand nine hundred and
ninety-six.



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FRANCIS M. JONES
ANTHONY J. RICHARDS
ROY A. STEVENSON
JAMES J. PARRINELLO
STEPHEN P. HILL

EDWARDS, WILLIAM, McMANUS,
AND JACCAVIDE, P.C.

ANTHONY L. EDWARDS
JAMES V. WILLIAMS
JAMES I. WILKINSON
ANTHONY R. CHARLEBOIS

CERTIFIED PUBLIC ACCOUNTANTS

82 GLENWOOD AVE., P.O. BOX 599, GLENB FALLS, NY 12801-0599
PHONE: 518-792-0920 FAX #: 518-792-3044

August 15, 1996

Mr. Lee Rivers
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

F96-3432

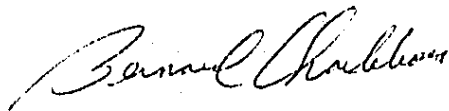
RE: Starline Mfg., Inc.
Application by Foreign Corporations to transact business in Florida

Dear Mr. Rivers:

When we prepared the application for Starline, we erroneously gave the address as 4282 S.E. 43rd St., Kings Bay. The correct address is 5282 S.E. 43rd St., Kings Bay.

Please change your records accordingly. We apologize for the inconvenience.

Very truly yours,



Bernard Charlebois

updated to correct typo
LR 8/19/96