F96000003567

TO: Qualification/I'nx Lien Section Division of Corporations		
SUBJECT: NIS NEOFFORAT	TED (A MED)	RASKA CORPORATION
Dear Sir or Madam:		
The enclosed "Application by Foreign Corr Florida", "Certificate of Existence", and che foreign corporation to transact business in b	poration for Authorization to T eck are submitted to register the Plorida.	Fransact Business in he above referenced
Please return all correspondence concerning	g this matter to the following:	
ROHALD R. CON	VEIED Name of Person)	4月10日日 1月1日4日日4 -0770579601004002 ********70.00 ******70.00 しりし-19699
NIS, INC A A	FBRASKA COLPOR	ZATION DIVISERE
Should you need to call someone concerni	ng this matter, please call:	mtn
RONALD R. CANFIELD OR (Name of Person) TRINA L.	at (402 (Area Code &	Daytime Telephone Number)
COURIER ADDRESS:	MAILING ADDR	ESS:

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399 Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

LORIDA DEPARTMEN

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Scorotary of State

July 5, 1996

RONALD R. CANFIELD %NIS, ...C. 1130 MANCHESTER LINCOLN, NE 68528

SUBJECT: NIS, INC.

Ref. Number: W96000014099

We have received your document for NIS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

Please explain in a little more details in number 8 of the application as to the type of business to be conducted in the State of Florida.

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) 487-6097.

Michael Mays Document Specialist

Letter Number: 496A00032932

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned	TRINA	L. CAA	JACUD	1	do hereby ce	rtlfy
that this Resolution of th	e Bourd of Di	rectors of	N15, 1	NC		
						S 2
	_,,	(Corporn	te Name)			
a corporation duly organ	ized and exis	ting under the	laws of the State	of NEBRA		
was duly adopted on	مياديا	R			, 19 9 [
was duty adopted on					!	ATIO
Be it resolved, that	MIS, I	ال	(Corporate Nam	ne)	<u> </u>	
organized and existing i						
NEBLASKA I	NUESTMEN	NT SERV	ices, INC		for use in Flo	rida.
Dated: July 8	1996		•			
- -	Signature of	L. Cur	Vice Chairman or a	SECTE + ATE	ey	· · · ·
· 	TRIA		CALFIELD print name			

INHS19(4/96)

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.	(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.)	
	(State or country under the law of which it is incorporated) (Fill number, if applicable)	
4.	(Date of Incorporation) 5. PERFETUAL (Duration: Year corp. will cease to exist or "perpetual")	
6.	(Date first transacted business in Florida, (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)	mber
7.	1130 Manchester Dr. 35 Ex	;
	LINION HE 68528 (Current mailing address)	FILED
8.	FOR PROFIT - CHECK CASHER (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida	
	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	`
	Name: Michelle Grang	
	Office Address: 210 South MACDIN	·
	TAMPA, Florida, 33609 (Zip Code)	
10	O. Registered agent's acceptance: (Zip Codę)	
H	laving been named as registered agent and to accept service of process for the above so corporation at the place designated in this application, I hereby accept the appointment egistered agent and agree to act in this capacity. I further agree to comply with the provisionall 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.	ns of

(Registered agents 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.

MISIN	2501	200	
H UF CUN	TART (T
PEKALI	11 0141	בייייייייייייייייייייייייייייייייייייי	
25	'	•	

. DIREC	and addresses of officers and/or directors: (Street address ONLY- P. O. acceptable) CTORS (Street address only- P. O. Box NOT acceptable)	
	RONALO R. CANGEDO	
	1130 Memchester Dr	
_	LINIOIN NE 68528	
ice Chair	nan: Trina L. CALFIED	
ddress:	1130 manchester Dr	
_	holiold NE 6852P	
Director: _		
.ddress: _		
•		
)irector: _		
\ddress: _		
	man (Ch A address and D. O. Dan MOT manned day)	88
	ERS (Street address only- P. O. Box NOT acceptable)	III 96
resident:	RONALD R. CAMPIDO	
resident: \ddress: _	RONALD R. CAMPIDO 1130 Manchester DR	<u> </u>
President: Address: _ _	RONALD R. CAMPIEDO 1130 Manchester OR_ Introla NE 68578	<u> </u>
resident: Address: _ - Vice Presid	RONALD R. CAMPIEDO 1130 Manchester OR Lidiolal NE 68578 lent:	6 84 9: 29
resident: Address: _ - Vice Presid	RONALD R. CAMPIEDO 1130 Manchester OR Introd HE 68578 Jent:	6 84 9: 29
resident: Address: _ /ice Presid Address: _	RONALD R. CAMPIEDO 1130 Manchester DR Lition HE 68578 Jent:	6 84 9: 29
resident: Address: _ /ice Presid Address: _ Secretary:	RONALD R. CAMPIEDO 1130 Manchester DR Litions HE 68578 Jent:	6 84 9: 29
resident: Address: _ /ice Presid Address: _ Secretary:	RONALD R. CAMPIEDO 1130 Manchester OR Lutional NE 68578 Jent:	6 84 9: 29
President: Address: _ Vice Presid Address: _ Secretary: Address: _	RONALD R. CAMPIEDO 1130 Manchester DR Litional NE 68878 Jent: TRINA L. CAMPIED	6 84 9: 29
President: Address: _ Vice Presid Address: _ Secretary: Address: _ Freasurer:	RONALD R. CAMPIEDO 1130 Manchester OR Lutional NE 68578 Jent:	6 84 9: 29
resident: Address: _ /ice Presid Address: _ Secretary: Address: Freasurer:	RONALD R. CAMPIEDO 1130 Manchester DR Introdu NE 68878 Jent: TRINA L. CAMPIEDO 1130 Manchester Dr	6 84 9: 29
resident: Address: _ /ice President Address: _ Secretary: Address: _ Treasurer: Address: _	RONALD R. CAMPIED 1130 Manchester DR Lithout NE 68578 Jent: TRINA L. CAMPIED 1130 Manchester Dr Linhow NE 68528	5 33 9: 29
resident: Address: /ice President: Address: Secretary: Address: Address:	RONALD R. CAMPIEDO 1130 Manchester DR Introdu NE 68878 Jent: TRINA L. CAMPIEDO 1130 Manchester Dr	5 33 9: 29

STATE OF



NEBRASKA

United States of America, State of Nebraska

58.

Department of State Lincoln, Nebraska

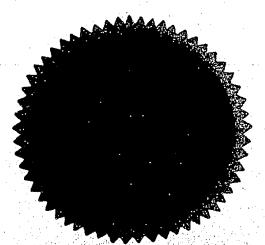
I, Scott Moore, Secretary of State of the State of Nebraska do hereby certify;

N.I.S., INC.

was duly incorporated under the laws of this state on October 19, 1992, and do further certify that no occupation taxes assessed are unpaid and no annual reports are delinquent; articles of dissolution have not been filed; and said corporation is in existence as of the date of this certificate.

SECRETARY OF STATE DIVISION OF CORPORATIONS
96 JUL 16 AM 9: 29

In Testimony Whereof,



I have hereunto set my hand and affixed the Great Seal of the State of Nebraska on June 4 in the year of our Lord, one thousand nine hundred and ninety-six.

Secretary of State