

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.

(Name of corporation - must include suffix)

Please return all correspondence concerning this matter to the following:

| HAMERIS COOPER | 6000019809460 |
|--|--|
| (Name of Person) | 10/18/9601112005 ********************************** |
| The Cooper Fuctor, Inc. | Zcv, 6:96-22329 |
| 1107 Hazeltine Bird, #4 | |
| (Address) | TE 60 |
| Chaska, ms 55318 | TALLANASSE TALLAN |
| (City/State/Zip) | |
| Should you need to call someone concerning this matter, please cal | 1:1 |
| (Name of Person) at (94) | ode & Daytime Telephone Number) |
| (Area C | ode & 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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 21, 1996

HARRIS COOPER THE COOPER FACTOR, INC. 1107 HAZELTIME BLVD #474 CHASKA, MS 55318

SUBJECT: THE COOPER FACTOR, INC.

Ref. Number: W96000022329

We have received your document for THE COOPER FACTOR, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 487-6094.

Doug Dickinson Document Specialist

Letter Number: 696A00048404

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.) |
|--------------------------|---|
| 2. | (State or country under the law of which it is incorporated) (FEI number, if applicable) |
| 4. | (Date of Incorporation) 5. Rempetitud Pri S (Duration: Year corp. will cease as extant of perpetual") |
| 6. 7. | (Date of Incorporation) (Duration: Year corp: will cause as extent of perpetual") Due to Commence November 1, 1996 (Date first transacted business in Florida. (See sections 607.1501, 607.1502, AND 817.155, Fis.) 1-arris Cooper - The Cooper Factor, Jnc. |
| | 1107 HazeHirie Bird #475, Chusta, MN 55318 |
| | Business Consulting (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: Harris Cooper |
| | Office Address: 9051 Bulfahure Drine Naples , Florida, 34108 |
| 10. | Registered agent's acceptance: (Zip Code) |
| regis all si and d | ing been named as registered agent and to accept service of process for the above stated oration at the place designated in this application. I hereby accept the appointment as statutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent. (Registered agent's signature) |
| O | Attached is a certificate of existence duly authenticated, not more than 90 days prior to elivery of this application to the Department of State, by the Secretary of State or other ficial having custody of corporate records in the jurisdiction under the law of which it is ecorporated. |

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: Harris Cooper Address: 1107 Hazeltine Blind +475 Chasica. mn 55318 Vice Chairman: __ Univice D. Cooper Olympia Drive Address: _ Eden Prairie INN 55347 Director: Address: _____ Director: Address: _____ B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: Harris Copper Address: _ Same as alone Vice President: Patrice D. Cooper same as above Address: Secretary: Patrice D. Cooper Address: Same aw above Treasurer: Harris Address: Same abone NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Vice Chairman, or any officer listed in number 12 of the application) Signature of Chairman, (Typed or printed hame and dapacity of person signing application)

State of Minnesota

SECRETARY OF STATE

95 OCT 31 AN II: 41
SECKETARY OF STATE
TALLAHASSEE, FLORIDA

Certificate of Good Standing

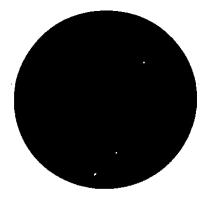
I, Joan Anderson Growe, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: The Cooper Factor, Inc.

Date Formed: 06/13/1989

Chapter Governed By: 302A

This certificate has been issued on 10/14/96.



Joan Anderson Grosse Secretary of State.