# 900 6052

Qualification/Tax Lien Section TO: **Division of Corporations** 

O PLUME & FANCY FEATHER (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:

807002008988--2 -11/19/96--01180--008 \*\*\*\*\*70.00 \*\*\*\*\*70.00 FELLOWS (Name of Person) SFANCY <u>Plume</u> 566 SUMMIT ڢ

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

(Name of Person)

521-1130 (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:

(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. PENN SYLVANIA 3. 11-3244803 (State or country under the law of which it is incorporated) (FEI number, if applicable)			
4. OTALL 89  (Date of Incorporation)  5. PERETUAL  (Duration: Year corp. will cease to exist or "perpetual")			
6. November 5 1996  (Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)			
7. PO BOX 566			
Clarks Summit PA 18411  Clarks Summit PA 18411  Current mailing address)			
8. whole sale + retail Selline of Fancy Feathers  (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: Edward Allison			
Office Address: 10 8. S. Main Ave			
Michan, Florida, 33130 (Zio Code)			
0. Registered agent's acceptance: (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 provisions of			

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.

and accept the obligations of my position as registered agent.

all statutes relative to the proper and complete performance of my duties, and I am familiar with

12. Nam	es and addresses of officers and/or directors: (Street address ONLY-T' acceptable)	P. O. Box
	ECTORS (Street address only- P. O . Box NOT acceptable)	·
Chairma	1:	
Address:		
Vice Cha	irman:	
Address:		· · · · · · · · · · · · · · · · · · ·
Director:		
Address:		····
Director:		
Address:		· · ·
B. OFFI	CERS (Street address only- P. O. Box NOT acceptable)	·
	Anthony Trento JR.	<del></del>
Address:	RO DON 410 - 4 Skyline Rr.	
	Waverly PA 18471	7 S . 9
	ident:	<u>最</u> 5 1
Address:	· · · · · · · · · · · · · · · · · · ·	PS 8 1
Secretary:	ELIZABETH A . Trento	FS 99
Address:	POBOS 410 - 4 Skyline Rr.	811.
	waverly PA 18471	<u> </u>
Treasurer:	·	
Address:		<del></del>
		· · · · · · · · · · · · · · · · · · ·
NOTE: I	f necessary, you may attach an addendum to the application listing addor directors.	lditional
13. <del>1</del> (S	In gotto Touries  ignative of Chairman, Vice Chairman, or any officer listed in number 12 of the ap	plication)
14. <u>EL</u>	(Typed or printed name and capacity of person signing application)	· ·

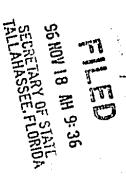


## COMMONWEALTH OF PENNSYLVANIA

## DEPARTMENT OF STATE

AUGUST 23, 1996

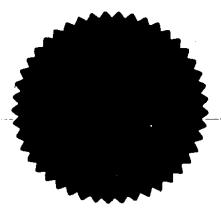
TO ALL WHOM THESE PRESENTS SHALL COME. GREETING:



I DO HEREBY CERTIFY THAT,

AMERICAN PLUME & FANCY FEATHER COMPANY, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

DPOS