F97000005964

To: Qualification/Tax Lien Section Division of Corporations
SUBJECT: POPPA CORPORATION
(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:
Name of Person)
POPPA CORPORATION 57
3000 ROYAL MARCO WAY #513 mm. (Address) 11/12
MARCO ISLAND, FL 34145 (City/State/Zip)
Should you need to call someone concerning this matter, please call: 70002344387—5 -11/12/37—01042—001 ******70.00 ******70.00
Name of Person) at (941) 642-3353 (Name of Person) (Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Section 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. POPPA CORPORATION
(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. DELAWARE (State or country under the law of which it is incorporated) 3. (FEI number, if applicable)
(State or country under the law of which it is incorporated) 4. (Date of incorporation)
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 35/1 SILVERSIDE ROAD, SUITE 105 = 35/1 WILMINGTON, DE 19810 Current mailing address)
(Current mailing address)
8. <u>CFASE AND RENT EQUIPMENT</u> , TRANSPORTATION FOR CORPORATE TRAVEL (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: <u>DAVE Brown</u>
Office Address: 3000 ROYAL MARCO WAY #513 MARCO ISLAND , Florida, 34145 (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.
(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: DAVID W. BROWN Address: 3000 ROYAL MARCO WAY \$513 MARCO ISLAND, FL 34145 Vice Chairman: CAROL M. BEOWN Address: 3000 ROYAL MARCO WAY #513 MARCO TSLAND. FL 34145 Address: Director: Address: B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: DAVID W. BROWN Address: 3000 ROYAL MARCO WAY #513 MARGO ISLAND, FL 34145 Vice President: CAROC M. BROWN Address: 3000 ROYAL MARCO WAY #513 MARCO TSLAND, FL 34145 Secretary: DAVID W. BROWN Address: 3000 ROYAL MARCO WAY #513 MARGO ISLAND, FL 34145 Treasurer: CAROL M. BROWN Address: 3000 KOYAL MARCO WAY #513 MARCO ISLAND FL 34145 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Deown (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) (Typed or printed name and capacity of person signing application)

State of Delaware

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "POPPA CORPORATION" 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 THIRTIETH DAY OF OCTOBER,
A.D. 1997.

DIVISION OF CORPORATIONS
OF AND 12 AM 11: 57



Edward J. Freel, Secretary of State

AUTHENTICATION:

8730444

DATE:

10-30-97

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