A PARTNERSHIP OF PROFESSIONAL CORPORATIONS

1443 TWENTIETH STREET

SUITE F

POST OFFICE BOX 520

VERO BEACH, FLORIDA 32961-0520

TELEPHONE (56) 778-3777 FACSIMILE (56) 778-3835

POST OF EACH, F

BOARD CERTIFIED CIVIL TRIAL LAWYERS

OF COUNSEL DAVID A. CAIRNS

H, RANDAL BRENNAN

C. KENNON HENDRIX

February 23, 1998

Florida Department of State Qualification/Tax Lien Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

300002442853--1 -02/27/98--01080--015 ******70.00 ******70.00

Re: Application of Jack Jolly & Son, Inc.

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Dear Sir or Madam:

Please find enclosed the Application by Foreign Corporation for Authorization to Transact Business in Florida of Jack Jolly & Son, Inc., Certificate of Existence and check in the amount of \$70.00. The enclosed is being submitted to your office to allow the registration of the above-referenced foreign corporation to transact business in the State of Florida.

Once the enclosed has been processed, I would most appreciate receiving a conformed copy of the same. I have enclosed a copy of the Application with attachments for your use and convenience.

Very truly yours

HENDRIX & BRENNAN

C. Kennon Hendrix

CKH:gkd

Enclosures

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section Division of Corporations					
SUBJECT: Tack Jolly + Sow 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:					
C. KENNON HENDRIX (Name of Person)					
(Name of Person)					
LAW OFFICES HENDRIX + BRENNAN (Firm/Company)					
(Firm/Company)					
1443 TWENTEITH ST., SUITE F, PO BOX 520 (Address)					
(Address)					
VINO BENCH, Fr. 32961 - 0526 8 555 (City/State/Zip) FF. 555					
Should you need to call someone concerning this matter, please call: C. Kennon Hendex at (561) 778-3777 55					
C. KENNON HENDRY at (561) 778-3777 55					
(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

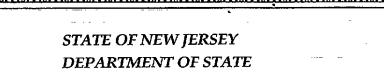
REGISTER A FOR		N TO TRA	NSACT BUSINESS		STATE OF FLORIDA.	1201	
(Name of corpora words or abbrevia	ition; must include the v	vord "INCC anguage as	ORPORATED", "COM will clearly indicate to	MPANY", that it is a	"CORPORATION" or corporation instead of a		
2	NJ		3,	22-	- 1905592 I number, if applicable)		
. Apri	2 2R, 1970	5	5. <u> PERP</u>	GTUAC	ase to exist or "perpetua		
(Date	of incorporation)		(Duration: Year co	orp. will ce	ase to exist or "perpetual	i")	
i narc	ransacted business in Fl		E CECTIONIC 407 15	01 607 15	02 and 917 155 E.C.)		
_			E SECTIONS 607.15	01, 607.13	02 and 817.155, F.S.)	98	i√se
<u>. ලබඉ</u>	EAST MAIN S	STREET				<u> </u>	_ <u>```</u>
2000	9	△ @^6∏	7			Nj	유물씨
11102	estany M)	(Current m	nailing address)			<u></u>	
		(,			3	중유미
	DisTRIBUTIO			Min		5 :2l	RA
	of corporation authoriz					<u> </u>	
	et address of Florida C. KENNON HENDRIX + 1443 TWENTE	_	_		Prop Box <u>NOT</u> accepta	ble)	
Office Address: _	1443 TWENTE	174 51,	SUFFE F. PO	Bux	520		
_	Vino Ben	CH	, Flor	rida, <u>3</u> 2	2961		
				(Zi _l	o code)		
10. Registered ag	ent's acceptance:						
in this application, l comply with the pro	I hereby accept/the app	ointment as tative to th	s registered agent and se proper and complet	i agree to c	stated corporation at th act in this capacity. I fu ance of my duties, and I	rther ag	ree to
		Registered	d agent's signature)		_		
		(1/c2ister	agent s signature)				
11. Attached is a ce	rtificate of existence du	ly authentic	cated, not more than 9	00 days pri	or to delivery of this app	lication	to the

Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

of which it is incorporated.

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)	
Chairman: ALEXANDER MCGUGAN, JR	
Address: 629 EAST MAIN ST.	•
MOORESTOWN, NJ 08057	
Vice Chairman:	
Address:	···
Director:	
Address:	
Director:	
Address:	
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	
President: BARBARA W. M. CUGAN	9, 9,
Address: 629 EAST MAIN STRUET	VISION VISION B FEL
MOORESTOWN, NJ 08057	· · · · · · · · · · · · · · · · · · ·
Vice President: ALEXANDER MCGUEAN III	PHIZ:
Address: 54 ERASAR ROAD	2: 5: STATE
MUDRESTOWN, NJ 08057	9 (8)
Secretary: BARBARA ANN M GUGAN	
Address: 1019 Muiberry Cové	
Mr. Counce, NT 08054	
Treasurer. BARBARA ANN MCGUGAN	
Address: 10/A MULBERRY CONE	
MT. CAMER, NJ 08054	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors	·•
13. Subus (Im Mugan (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
Marray My Mc Can Comment	150
(Typed or printed name and capacity of person signing application)	



SHORT FORM STANDING

JACK JOLLY & SON, INC.

I, the Secretary of State of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on April 22, 1970.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

> Alexander Mcgugan Jr 629 East Main St Moorestown, NI 08057

Continued on next page . . .

