Saturday, March 14, 1998

Qualification/Tax Lien Section Division of Corporations P.O. box 6327 Tallahassee, FL§2314

To whom it may concern,

Please find check number 831 in the amount of \$78.75. \$70.00 for the registration fee and \$8.75 for a certificate of status.

Thank you in advance for your cooperation.

W98-6253

Sincerely,

Jale Unutmaz, President, Cservices, Inc.

To visit us online go to: http://www.Cservices.com

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******78.75 ******78.75

SECRETARY OF STATE VISION OF CORPORATIONS

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Cservices

TRANSMITTAL LETTER

TO: Qualification/Tax Lien Section Division of Corporations	. <u>\$</u>
SUBJECT: Cservices, 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:	
Jale Unutmaz – (Name of Person)	ž., .:
Cservices, Inc (Firm/Company)	-
4297 Island Circle, Unit E (Address)	· · — –
Fort Myers, FL 33919 (City/State/Zip)	m in the second
Should you need to call someone concerning this matter, please call:	
Jale Unutmaz (Name of Person) at (941) 489-2084 (Area Code & Daytime Telephone Number)	er)

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

March 20, 1998

JALE UNUTMAZ, PRESIDENT CSERVICES, INC. PO BOX 07053 FT MYERS, FL 33919

SUBJECT: CSERVICES, INC. Ref. Number: W98000006253

We have received your document for CSERVICES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

Please note that line 6 should address this Delaware corporation only, and not any other entities.

In section 9, please set forth the name of the individual signing line 10. That individual will be listed as your registered agent.

Please note that we are returning the certified copy you submitted, as it is not the same as the certificate we require, described in the next paragraph.

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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

(850) 487-6958.

Lee Rivers Document Examiner

Letter Number: 298A00015132

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.	Cservices, Inc. (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, USA (State or country under the law of which it is incorporated) 3. 65-0814060 (FEI number, if applicable)	-
4.	November 18, 1997 (Date of Incorporation) 5. Perpetual (Duration: Year corp. will cease to exist of perpetual")	
6.	TY Outliffeetion	
	(Date first transacted business in Florida. (SEE SECTIONS 607.1301, 607.1302, AND 617.133, 17.5.)	≥ 2200
7.		
	P.O. Box 07053. Ft. Myers, FL 33919	<u>⊼</u>
	(Current mailing address)	
8. 9.	The purpose of the corporation is to engage in any lawful act or activity for which corporations may be organized under the General Corporation Law of Delaware/Florida (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)	<u> </u>
	Name: Jale Unutmaz	
	Office Address: 4297 Island Circle, Unit E	* .
	Fort Myers, Florida, 33919 (Zip Code)	-
1	0. Registered agent's acceptance:	
E c r	Having been named as registered agent and to accept service of process for the above 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 provisual statutes relative to the proper and complete performance of my duties, and I am familiand 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)

	CCTORS (Street address only- P. O . Box NOT acceptable)			
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Address:				÷
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Address:			-	23 - 37
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Address:				

Director:	<u> </u>		-	
Address:			· •	֥
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B. OFFI	CERS (Street address only- P. O. Box NOT acceptable)	APR .	器	
President:	Jale Unutmaz	<u>_0</u>		-
Address:	4297 Island Circle, Unit E	3	25 C	
	Fort Myers, FL 33919	9: (STAT RAT	
Vice Presi	dent:	36	E SK	
Address:			4-	
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Secretary:				_
Address:				J.
Treasurer				
				•-
				-
				
NOTE: I	f necessary, you may attach an addendum to the application listing additional id/or-directors.	,	<u>-</u>	
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13.	all Anufman Misident Sumes O	<u>Z</u> C	. —	
(Si	gnature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)			

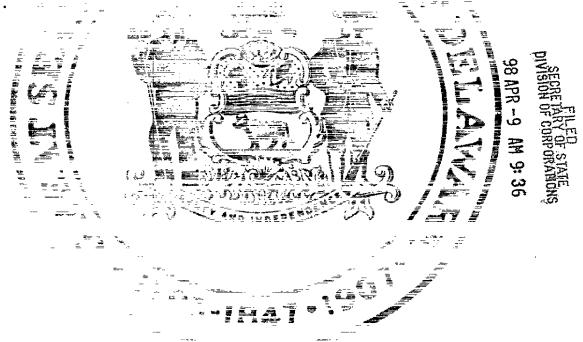
14. <u>Jale Unutmaz</u>, <u>President</u>, <u>Cservices</u>, <u>Inc.</u>
(Typed or printed name and capacity of person signing application)

State of Delaware

Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CSERVICES, INC." 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 SECOND DAY OF APRIL, A.D. 1998.



Edward J. Freel, Secretary of State

AUTHENTICATION:

DATE:

9008171

04-02-98

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