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TRANSMITTAL LETTER

TO: Qualification/Tax Lien Section  
Division of Corporations

500002430605--4

-04/16/98--01056--002

\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT: Criswell, 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:

Sharon L. Criswell

(Name of Person)

(Firm/Company)

3000 Bent Cypress Drive

(Address)

Wellington, Florida 33414

(City/State/Zip)

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98 APR 16 PM 3:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Debora E. Collard  
(Name of Person)

at ( 503 ) -228-2525  
(Area Code & Daytime Telephone Number)  
Pacific Standard Time

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

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# 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. Criswell, 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. Nevada  
(State or country under the law of which it is incorporated)
3. applied for  
(FEI number, if applicable)
4. February 23, 1998  
(Date of Incorporation)
5. perpetual  
(Duration: Year corp. will cease to exist or "perpetual")
6. MARCH 1, 1998  
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. \_\_\_\_\_  
3000 Bent Cypress Drive, Wellington, Florida 33414  
(Current mailing address)
8. Acquire, Develop + Sell Real Property  
(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: Sharon L. Criswell

Office Address: 3000 Bent Cypress Drive

Wellington, Florida, 33414

(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.*

Sharon Criswell  
(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.

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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: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: Sharon L. Criswell

Address: 3000 Bent Cypress Drive  
Wellington, Florida 33414

Director: William T. Criswell

Address: 3000 Bent Cypress Drive  
Wellington, Florida 33414

**B. OFFICERS (Street address only- P. O. Box NOT acceptable)**

President: William T. Criswell

Address: 3000 Bent Cypress Drive  
Wellington, Florida 33414

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: Sharon L. Criswell

Address: 3000 Bent Cypress Drive  
Wellington, Florida 33414

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

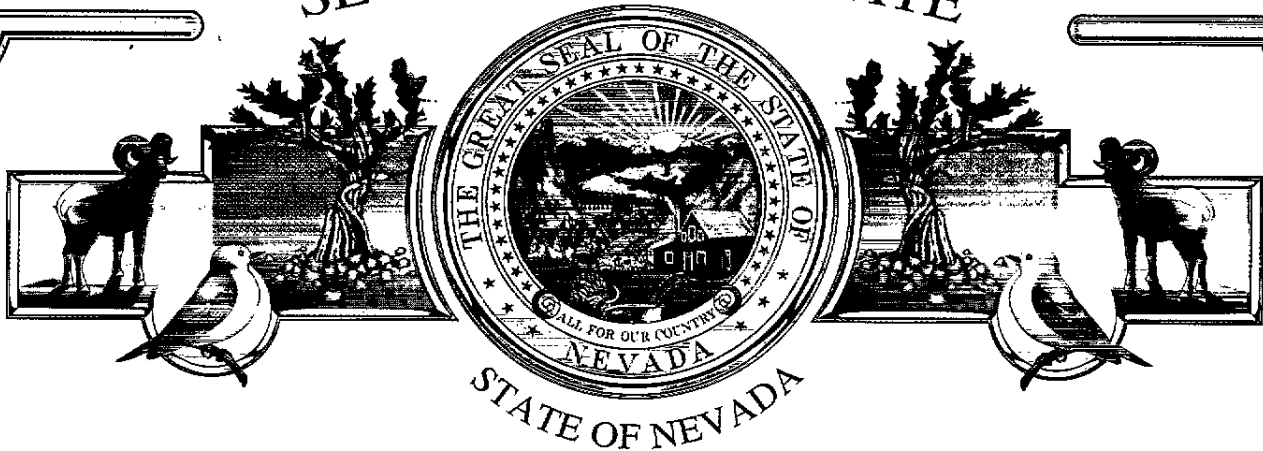
**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Sharon L. Criswell  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Sharon L. Criswell, Secretary and Director  
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

# SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, and limited-liability partnerships pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **CRISWELL, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since February 19, 1998, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand  
and affixed the Great Seal of State, at my office, in  
Carson City, Nevada, on February 23, 1998.



*Dean Heller*

Secretary of State

By

*Wendy D. Smith*

Certification Clerk

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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