ACCOUNT NO. : 072100000032

REFERENCE :

792575

AUTHORIZATION :

COST LIMIT : \$ 70.00

ORDER DATE: April 23, 1998

ORDER TIME : 9:15 AM

ORDER NO. : 792575-005

CUSTOMER NO: 5024472

CUSTOMER: Ms. Michele Penaranda

Solomon And Weinberg Llp

70 East 55th Street

New York, NY 10022

900002499579--8

## FOREIGN FILINGS

CAPSTONE ATLANTIC CORP.



XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY

\_\_\_\_ PLAIN STAMPED COPY

\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Deborah Schroder

## 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	Capstone Atlantic Corp. (Name of corporation: mu abbreviations of like impor or partnership if not so co	t in language a	s will clearly indicate	D", "COMPANY", "CORP that it is a corporation ins	ORATION" or stead of a natu	words or ral person
2	Delaware (State or country under th	e law of which	it is incorporated)	(FEI number, if applica	ble)	
4	. April 6, 1998 (Date of Incorporation	)	5. <u>Perpetual</u> (Duration:	Year corp. will cease to	exist or "perpe	tual")
6	Upon qual (Date first transacted busi	ification ness in Florida.	See sections 607.15	501, 607.1502, and 817	7.155, F.S.)	DIVISION N
7	. 11 Madison Avenue, New	York, New Yo	rk 10010			ORE THEY O
8		real prope	(Current mailing a	ddress) ntry to be carried out in 1	the state of Flo	112: 50 m
9	. Name and street add acceptable) Name	_	a registered agent		op Box <b>NQT</b>	
	Office	Address: _	1201 Hays Street			
			Tallahassee	, Florida,	32301 (Zip Co	ode)
1	O. Registered agent's	s acceptanc	e:			

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.

By: Dail Shells as 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.

addresses of officers and/or directors: (Street address ONLY-P.O. Box

12.	NOT acceptable)
A.	DIRECTORS (Street address only- P.O. Box NOT acceptable)

Chairman:			
Address:	<u> </u>		
Vice Chair	man:		
Address:			
Director:	Richard Ortiz,		
Address:	11 Madison Avenue		
	New York, New York 10010		
Director:			
Address:		98	SIAIC 3S
11ddiobo.		ΑРК	92 92 92 93 93 93 94
B. OFFIC	ERS (Street address only- P.O. Box NOT acceptable)	24	OF C
		2	3
President:	<u> </u>	্র	<u>~</u> ≥≥
Address:	· · · · · · · · · · · · · · · · · · ·	0	
Vice Presid	lent: Richard Ortiz		
Address:	11 Madison Avenue		
	New York, New York 10010		
Secretary:			•••
Address:			
Treasurer:			
Address:		<u> </u>	
NOTE: If n directors.	necessary, you may attach an addendum to the application listing additional office	ers and/	or
13	(Signature & Chairman, Vice Chairman, or any officer listed in number 12 of the applic	ration \	
1.4	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application of the Applicat	жион. <i>ј</i>	
14	(Typed or printed name and capacity of person signing application)		<del></del>

## State of Delaware

PAGE

## Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CAPSTONE ATLANTIC CORP." 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 TWENTY-SECOND DAY OF APRIL, A.D. 1998. - \_ \_

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

2877208 8300 981153567



Edward J. Freel, Secretary of State

**AUTHENTICATION:** 

DATE: