F98000003103

To: Qualification/Tax Lien Section Division of Corporations	· 	
SUBJECT: Quality	RESEArch, INC.	
(Na	me of corporation - must include suffix)	رسد المساوية والمساوية والمساوية
Dear Sir or Madam:	8000 25 -06/02/9 *****70	9801029001
The enclosed "Application by Foreign "Certificate of Existence", and check a transact business in Florida.	Corporation for Authorization to Transact Business in re submitted to register the above referenced foreign co	Florida", orporation to
Please return all correspondence concer	ming this matter to the following:	
SusAn	(Name of Person)	W98-7981
Qualita	RESEArch, INC.	
260 R	e (T)	
259 K	(Address)	→
Naples	FL 34114	Nr 860 Jivir
,	(City/State/Zip)	2
Should you need to call someone conce	erning this matter, please call:	LED STATE
Susan DEAN	at (941, 195-5107	5 1
(Name of Person)	(Area Code & Daytime Telephone Number)	' untr
		6/2
COURIER ADDRESS:	MAILING ADDRESS:	4/2
Qualification/Tax Lien Section	Qualification/Tax Lien Section	

Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 Qualification/Tax Lien Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314



April 9, 1998

SUSAN DEAN QUALITY RESEARCH INC. 259 RIVERWOOD RD. NAPLES, FL 34114

SUBJECT: QUALITY RESEARCH, INC.

Ref. Number: W98000007981

We have received your document for QUALITY RESEARCH, INC.. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$70.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Simply adding "of Florida" or "Florida" to the end of a name 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) 487-6097.

Michael Mays Document Specialist

Letter Number: 998A00018923



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

RESOLUTION OF BOARD OF DIRECTORS

that this Resolution of the Board of Directors of Quality RESEArch, INC.	
a corporation duly organized and existing under the laws of the State of <u>Delaware</u> , was duly adopted on <u>September</u> , 1994.	
Resolved, that Quality Research, Inc. and existing in the State of Florida , hereby adopts the name Quality Research of Naples, Inc. for use in Florida.	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
Dated: 5-28-98 Signature of at least one director	

INHS19(3/95)

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. Quality RESEArch, FNC.	
(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. De Aware (State or country under the law of which it is incorporated) 3. 5/-0357/59 (FEI number, if applicable)	
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. Quration: Year corp. will cease to exist or "perpetual")	
6. To occur in the future ~ 8/98	
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	
7. 259 Riverwood Rd	
Naples, FL 34114	-
Maples FL 34114 E 25 (Current mailing address)	
8. Consulting Service	
(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: SUSAN L. DEAN	
Office Address: 259 Riverwood Rd.	
$\frac{N + ples}{}$, Florida, $\frac{34/14}{}$ (Zip code)	
(Zip code)	
10. Registered agent's acceptance:	
10. Registered agent 6 acceptance.	
Having been named as registered agent and to accept service of process for the above stated corporation at the place designation 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.

A. DIRECTORS (Street address only - P.O. Box NOT acceptable) Chairman: SUSAN L. DEAN Address: 95 Riverwood Rd Numples FL 34/114 Vice Chairman: Address: Director: Address: B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: SUSAN L. DEAN Address: 259 Riverwood R.d. Numples FL 34/114 Vice President: 95 95 95 95 Address: Secretary: Address: Secretary: Address: NOTE: If needsary, you may shack an adjundum to the application listing additional officers and/or directors. (Signature of Chairman, or any officer listed in number 12 of the application) 14. SUSAN DEAN (Typed of Preside name and capacity of person signing application)	2. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)	
Chairman: SUSAN L. DEM Address: 359 Riveruse d Rd Naples FL 34114 Vice Chairman: Address: Director: Address: B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: Susan L. DEM Address: 259 Riveruse d Rd. Vice President: Susan L. DEM Vice President: Susan L. Susan		
Address: Director: Address: B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: Sus Aw DEAD Address: Note President: Address: Secretary: Address: Secretary: Address: NOTE: If necessary, you may splach an addendum to the application listing additional officers and/or directors. 13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. Sus And Sus Death Pressident:	Chairman: Susan L. DEAN	
Vice Chairman: Address: Director: Address: B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: Sus And DEAD Address: Address: Director: Address: B. OFFICERS (Street address only - P.O. Box NOT acceptable) Vice President: Vice President: Address: Secretary: Address: NOTE: If necessary, you may adach an addendum to the application listing additional officers and/or directors. Signature: (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. Sus Andress: Director: Address:	Address: 259 Riverwood Rd	
Address: Director: Address: B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: Sus And A. De Andress: Norpics FL 34114 Vice President: Address: Secretary: Address: NOTE: If necessary, you may shach an addiendount to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. Sus A. M. De Andress of Acceptable)	Naples FL 34114	
Director: Address: B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: Sus Aw L. DEAP Address: Address: Nor Description of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. Sus Aw L. Deap President Gignature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	/ice Chairman:	
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Address: B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: \$\int_{\text{SCAN}} \int_{\text{NoTAV}} \in		····
B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: Sus Av L DEAP Address: 259 Riverwood Rd. Vice President: 90 327 Vice President: 90 327 Address: Secretary: Address: 17 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 13. (Signature of Chairman, Or any officer listed in number 12 of the application) 14. Sus San Deap Sident		
B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: Sus Aw L. DEAP Address: 259 Riverwood Rd. Vice President: 65 34/1/4 Vice President: 65 34/1/4 Vice President: 65 34/1/4 Secretary: Address: 75 Ad	Address:	
President: Sus Aw L. DEAP Address: 259 Rivrwood Rd. Vice President: 6 Secretary: Address: Secretary: Address: NOTE: If necessary, you may adach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. Sus And L. Deap President:	3. OFFICERS (Street address only - P.O. Box NOT acceptable)	
Address: Description Desc	racidant: St. 5 And L NEAD	
Vice President: Address: Secretary: Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. SUSAND SET Per Sident	ditress: 259 Riverwood Rd.	-/- -
Vice President: Address: Secretary: Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. SUNAND A DEAD Prosident	NADLES F1 34114	_ ₹
Secretary: Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. Set Set Andress:	,	24 -A-
Secretary: Address: Treasurer: Address: NOTE: If necessary, you may anach an addendum to the application listing additional officers and/or directors. 13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. Super Description		
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(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. Susan Description	ddress:	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. Susan Description		
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. Susan Description	OTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors	S.
14. SUSAN L. DEAN Prosident		
14. JUSAN K, UEAN President (Typed or printed name and capacity of person signing application)		
	(Typed or printed name and capacity of person signing application)	<u>.</u>

State of Delaware

Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "QUALITY REALTY, 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 TWENTY-THIRD DAY OF
MARCH, A.D. 1998.

98 JUN -2 AM 9: 06

98 JUN -2 AM 9: 06

Edward J. Freel, Secretary of State

AUTHENTICATION:

DATE: 8987517

03-23-98

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