F98000003314

To: Qualification/Tax Lien Section		
Division of Corporations		
SUBJECT: Star Vencting (Name of corporation - must include	$\frac{1}{\sqrt{1 - c}}$	· -
(Name of corporation - mase more	800002	
Dear Sir or Madam:	-06/11 *****	/9801030003 78.75 *****78.75
The enclosed "Application by Foreign Corporation for Authorization "Certificate of Existence", and check are submitted to register the abtransact business in Florida.	to Transact Business in ove referenced foreign c	a Florida", corporation to
Please return all correspondence concerning this matter to the follow	ing:	
(Name of Person)		
Four Star Vanding. (Firm/Company)	1775	1
156R South Mai	53.	CILL 86
(City/State/Zip)	01949	FILED SETABLY OF S
Should you need to call someone concerning this matter, please call		OF STATE STATE ONS
(Name of Person) (Name of Person) (Area Code & Day	time Telephone Numbe	n ynth

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

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.
(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. (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. (Date of incorporation) 5. Respectual (Duration: Year corp. will cease to exist or "perpetual")
6. Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 156R South Main St.
Current mailing address)
8. (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) \(\sigma \)
Name: Fred Hary
Office Address: Line + Building - 1899 NE 164+2 St.
North Man. Beach, Florida, 33162 (Zip code)
10. Registered agent's acceptance:
II have a more description of agent and to accept comice of process for the above stated corneration at the place designated

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.

(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)		
A. DIRECTORS (Street address only - P.O. Box NOT acceptable)	eri Tarangan		
Chairman: Bonie Tonley #	- 1 - 2 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2		
Address: SS Year had It			
middleton, mA Olaya			
Vice Chairman:			
Address:	· · · · · · · · · · · · · · · · · · ·		
Director:			
Address:			
7.144.035.			
Director:			
Address:			
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	98		
President: William Maricy			
Address: 85 Prahady St.			
midaleton MA 01949	~ ~ ~ ~		
Vice President: SAME	`` >ਙ		
Address:	ن ة		
Secretary: SAME			
Address:			
Treasurer: $\underline{\qquad} \underline{\qquad} \underline{\qquad} \underline{\qquad}$	<u> </u>		
Address:			
Clerk. Bonnie Mortey, 85 Peabody St.	niddleton MA DIGYE		
NUIL: If necessary, you may attach an addendum to the application listing additi	ional officers and/or directors.		
(Signature of Chairman, Vice Chairman, or any officer listed in m	marker 12 of the amiliantian)		
	en de la companya de		
14. <u>John Charman Board of Directors</u> (Typed or printed name and capacity of person signing application)			



The Commonwealth of Massachusetts

Secretary of the Commonwealth

State House, Boston, Massachusetts 02133

May 29, 1998

To Whom It May Concern:

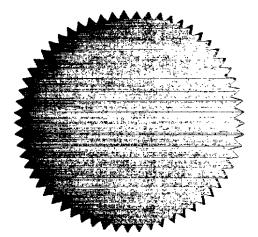
I hereby certify that,

Four Star Vending, Inc.

appears by records of this office to have been incorporated under the General Laws of this Commonwealth on May 5, 1992.

I also certify that so far as appears of record here, said corporation still has legal existence.

SECRETARY OF STATE DIVISION | 1 PM 2: 02



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

Villian Travino Galicin

Secretary of the Commonwealth

^{*} MGL Chapter 156B Section 83A provides that certain consolidations and mergers may be filed with the division within thirty days after the effective date of the merger or consolidation.