# F98000003380

To: Qualification/Tax Lien Section Division of Corporations
SUBJECT: THE GUN MADER, FNC, (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:
BARRY OSULLIAN, PRESICE OF (Name of Person)
(Firm/Company)
3207 con cors way 5 TATE (Address)
Plant (17, FL, 3356) 4ntn (City/State/Zip) 6/15
Should you need to call someone concerning this matter, please call:  300025595031 -06/15/9801050001 *****70.00 ******70.00
Base Oullings at (8/3) > 54-044   (Name of Person)   (Area Code & Daytime Telephone Number)

#### **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				
4. 10/18/83 5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")				
6. NOT YET STARTED - BUINESS WILL BEGIN BROWN JULY 10, 1990 (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)				
7. # 2 Howks AXX plaza				
(Current mailing address)				
(Current mailing address)				
8. RETAIL SALES  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)				
(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: BARRY O'SULLIUM  Office Address: 3207 CONLORD WAY				
Office Address: 3207' CO~LORD WAY				
Phant city, Florida, 3356) (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.				
(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 a	and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)		
A. DIRECT	TORS (Street address only - P.O. Box NOT acceptable)		
Chairman: _			
Address:			
Vice Chairm	nan:	<del></del>	
Address:	· · · · · · · · · · · · · · · · · · ·		
Director:			
Address:	- · · · · · · · · · · · · · · · · · · ·		
—— Director:			
	· · · · · · · · · · · · · · · · · · ·		
	ERS (Street address only - P.O. Box NOT acceptable)	, 36	1000 1000 1000 1000 1000
President: _	BARRY O'SULLIVAN		- 3
Address:	BARRY O'SULLIVAN  3205 CONCORD WAY  PLANT CAY, FL, 3356)	<u>о</u>	NRY III
	plant copy, Fl, 3356)	7	- <u>유</u> 년 ::s -
	nt;	- -	AIE.
Address:			Ś
Secretary:	- Barry Mullian		<u>"</u>
Address:	3202 cm coes was		<del></del>
<u></u>	plat (17, FL, 3356)		
Treasurer:			
Address:			
NOTE: If n	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)		
4	BARRY O'SULLIVAN PRASISKY		
	(Typed or printed name and capacity of person signing application)		



### Rebecca McDowell Cook Secretary of State

CORPORATION DIVISION
CERTIFICATE OF CORPORATE GOOD STANDING

I, REBECCA McDOWELL COOK, SECRETARY OF STATE OF THE STATE & OF MISSOURI, DO HEREBY CERTIFY THAT THE RECORDS IN MY OFFICE AND IN MY CARE AND CUSTODY REVEAL THAT

THE GUN TRADER, INC.

WAS INCORPORATED UNDER THE LAWS OF THIS STATE ON THE 18TH DAY OF OCTOBER, 1983, AND IS IN GOOD STANDING, HAVING FULLY COMPLIED WITH ALL REQUIREMENTS OF THIS OFFICE.

IN TESTIMONY WHEREOF, I HAVE SET MY HAND AND IMPRINTED THE GREAT SEAL OF THE STATE OF MISSOURI, ON THIS, THE 8TH DAY OF JUNE, 1998.

Secretary of State

