

ACCOUNT NO.

072100000032

REFERENCE

836267

7133008

AUTHORIZATION

ORDER DATE: May 28, 1998

ORDER TIME :

2:14 PM

ORDER NO. : 836267-005

CUSTOMER NO:

7133008

CUSTOMER: Mr. Len Kaplan

Southern Services Corporation

660 N.w. 125th Street

Miami, FL 33168

FOREIGN FILINGS

W98-13036 p.612

NAME: SURE SERVICE CORPORATION

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

_ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

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CONTACT PERSON: Stacy L Earnest

SEGRETARY OF STATE TALL AHASSEE FLORIDA

98 JUN 16 AM 10: 26

LIFED



Resubmit

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 8, 1998

CSC

ATTN: STACY L. EARNEST

SUBJECT: SURE SERVICE CORPORATION

Ref. Number: W98000013036

We have received your document(s) in this office, however, a copy of the document is being returned for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report and penalty fees is \$1,150.00.

Enclosed please find a copy of section 607.1501 or 617.1501, Florida Statutes, which lists those activities that do not constitute transacting business in this state. If after reviewing this section you determine erroneous information was inserted on the application, a sworn affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business in Florida prior to the year the application was submitted did not constitute transacting business pursuant to section 607.1501 or 617.1501, Florida Statutes.

We are also returning your name resolution form, along with a blank form; please use one of them to make the following corrections. In the space after the words "hereby adopts the name," only the adopted name itself should appear, not phrase with both names. Also, the adopted name must include a corporate suffix.

If you have any questions concerning the filing of your document, please call (850) 487-6958.

Lee Rivers Document Specialist Letter Number: 798A0003205

RESOLUTION OF BOARD OF DIRECTORS

I, the undersigned <u>Don Horwitz</u> , do hereby certify that this Resolution of the Board of Directors of <u>Sure Service Corporation</u>	 -
a corporation duly organized and existing under the laws of the State of $\underline{Delaware}$, was duly adopted on \underline{May} , 19 $\underline{98}$.	
Resolved, that <u>Sare Service Corporation</u> organized and existing in the State of <u>Delaware</u> hereby adopts the name <u>Sare Service of Mares</u> for use in Florida.	lizmi, Inc
Oated: 5-18-98 X (Signature of at least one DASSEE FLORI) INHS19(3/93)	<u>-</u>



PROBABLY THE FINEST COMMERCIAL CLEANING COMPANY IN THE COUNTRY

June 11, 1998

CSC – Tallahassee 1201 Hays Street Tallahassee, FL 32301

Attn: Kim Clemons

Re: Sure Service Corporation

E.I. #: 65-0815696

Our application to transact business in Florida contained erroneous information. The Corporation did not conduct business in Florida until 1998.

We attest to this fact.

Leonard Kaplan

Controller

Sworn and subscribed before me this 11th day of June, 1998, did appear Leohard Kaplan, personally known to me to be the person executing this document.

Nieves Jaramillo Notary Public

State of Florida

My Commission Expires:

OFFICIAL NOTARY SEAL NIEVES JARAMILLO COMMISSION NUMBER CC584435 MY COMMISSION EXPIRES SEPT, 11,2000

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. Sure Service Corporation (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 extractions.
abbreviations of like import in language as will clearly induste that it is a corporation instead of a natural person or partnership if not so contained in the name at present
2. De laware (State or country under the law of which it is incorporated) 3 (FEI number, if applicable)
4. October 28, 1997 5. perpetual (Duration: Year corp. will cease to exist or "perpetual")
6. December , 1997 (Date first transacted business in Florida. (See sections 607, 501, 607, 1502, and 817, 155, F.S.)
7 660 Northwest 125 Street
North Miami, Florida 33168 200 8
8. Cleaning Service (Purposets) or corporation authorized in name state or connect to be carried out in the state of Fiorida)
9. Name and street address of Florida registered agont: (P.O. Box or Mail Drop Box NOT 5 Name:
Office Address: 660 Northwest 125 Street
North Miami , Florida, 33/68
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, is surther agree to comply with the provisions of all statutes relative to the proper and complete partormance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

11. Attached is a certificate of existence duty sothenticated, 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 jurismation under the law of which it is incorporated.

Chairman: Address: // 32 Northeast /// Road North Miami, Florida 33/8/ Vice Chairman: Address: Director: Address: Director: Address: B. OFFICERS (Street address only-P.O. Box NGT acceptable) President: On Horwitz Address: // North Miami, Florida 33/8/ Vice President: Address: Secretary: Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers a directors.	
North Miami, Florida 33181 Vice Chairman: Address: Director: Address: B. OFFICERS (Street address only-P.O. Box NOT acceptable) President: Don Horwitz Address: North Miami, Florida 33181 Vice President: Address: Secretary: Address: NOTE: If necessary, you may attach an addendum to the untilication listing additional affects.	
Vice Chairman: Address: Director: Address: B. OFFICERS (Street address only- P.O. Box NOT acceptable) President: Don Horwitz Address: 1932 Northeast 119 Road North Miami, Florida 33181 Vice President: Address: Secretary: Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the intelligation listing additional affects.	
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Secretary: Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional effects.	22
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directors.	
	nd/or
13. ×	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application	

(Typed or printed name and capacity of person signing application)

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SURE SERVICE CORPORATION" 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 FOURTH DAY OF JUNE, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

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Edward I. Freel, Secretary of State

AUTHENTICATION:

DATE: