203537

TRANSMITTAL LETTER

Qualification/Tax Lien Section TO: Division of Corporations

CLIFFHANGER ENTERPRISES, (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:

Kay M. Robbins (Name of Person)	98 JUN 2: SECRETA TALLAHAS
CLIFF'S Bort Erill (Firm/Company)	2 PH 3:1
3033-2 Monument Rod (Address)	- 125a2
Jackson ville FL 32295 (City/State/Zip)	025426199

Should you need to call someone concerning this matter, please call:

at (964) 928-0730 (Area Code & Daytime Telephone Number)

1/4/23/51

COURIER ADDRESS:

Qualification/Tax Lien Sec. 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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 2, 1998

KAY M. ROBBINS CLIFF'S BAR & GRILL 3033-2 MONUMENT RD JACKSONVILLE, FL 32225

SUBJECT: CLIFFHANGER ENTERPRISES, INC.

Ref. Number: W98000012522



We have received your document for CLIFFHANGER ENTERPRISES, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate 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) 487-6094.

Agnes Lunt Document Specialist

Letter Number: 998A00030868

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:

ι.	(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) 3. 59-3508014 (FEI number, if applicable)
4.	(Date of Incorporation) 5. Prepetual (Duration: Year corp. will cease to exist or "perpetual")
6. 7.	(Date first transacted business in Florida. (See Sections 607.1501, 607.1502, AND 817.155, F.S.) 2970 Costez Road
	Jacksonville, FC 32246 (Current mailing address)
	(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9	Name and street address of Florida registered agent: (P.O. Box or Mail Drop FOR NOT acceptable)
	Name: KAY M. Robbins Office Address: 3033-2 Monument Rd Office Address: 3033-2 Monument Rd (Zip Code) Registered agent's acceptance:
]	(Zip Code) [O. Registered agent's acceptance: [O. Registered agent's acceptance: [O. Registered agent's acceptance and to accept service of process for the above stated

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.

Kay M. Roblins
(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. DIRECT	TORS (Street address only- P. O . Box NOT acceptable)	
Chairman: _	NA	
Address:		:- '
		·
Vice Chairma	an: N/A 52 = 3	
Address:	F. 10	m
	Fig. 3	
Director:	N/A 55 5	1
Address:		
		-
Director:	- N/A	-
Address:	•	
	RS (Street address only- P. O. Box NOT acceptable)	
President:	Kay M. Robbins 2970 Cortez Rd	
Address:		
	Jackson ville FL 32246	
Vice Presiden	nt:	
Address:		-
Secretary:	Ray M. Robbins	
	2910 Cortez Rd	-
	Jacksonulle FL 32241	
Treasurer:	Kay M Robbins	
Address:	2970 Cortez Rd	
	Jacksonville FC 32246	-
officers and/o	ecessary, you may attach an addendum to the application listing additional or directors.	
13.	ture of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
(Signat 14 K	· · · · · · · · · · · · · · · · · · ·	
	(Typed or printed name and capacity of person signing application)	

State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CLIFFHANGER ENTERPRISES, 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 EIGHTH DAY OF JUNE, A.D. 1998.



AUTHENTICATION:

9125007

DATE:

06-08-98

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