F98000004376

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: HARPSTRINGS, INC.
(Name of corporation - must include suffix)

700002603847--4
-07/31/98--01039--001
*****70.00 *****70.00

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:

CATHERINE B. WAY
(Name of Person)

HARPSTRINGS, INC.
(Firm/Company)

917 SUMMER LAKES DRIVE
(Address)

ORLANDO FLORIDA 32835
(City/State/Zip)

FILED
98 JUL 31 PM 12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

CATHERINE WAY at (407) 295-1082
(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

7/31/98

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. HARPSTRINGS, INC.
(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. ILLINOIS (State or country under the law of which it is incorporated)

3. 36-4157591 (FEI number, if applicable)

4. MAY 8, 1997 (Date of incorporation)

5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")

6. HAVE NOT YET TRANSACTED BUSINESS IN FLORIDA
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 917 SUMMER LAKES DRIVE
ORLANDO, FL 32835
(Current mailing address)

8. MUSICIAN : ONE HARPIST for MUSICAL ENTERTAINMENT
(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: CATHERINE B. WAY

Office Address: 917 SUMMER LAKES DRIVE
ORLANDO, Florida, 32835 (Zip code)

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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.

Catherine B. Way
(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)

Chairman: CATHERINE B. WAY

Address: 917 SUMMER LAKES DRIVE
ORLANDO, FL 32835

Vice Chairman: CATHERINE B. WAY

Address: 917 SUMMER LAKES DRIVE
ORLANDO, FL 32835

Director: CATHERINE B. WAY

Address: 917 SUMMER LAKES DRIVE
ORLANDO, FL 32835

Director:

Address:

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TALLAHASSEE, FLORIDA

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: CATHERINE B. WAY

Address: 917 SUMMER LAKES DRIVE
ORLANDO, FL 32835

Vice President: CATHERINE B. WAY

Address: 917 SUMMER LAKES DRIVE
ORLANDO, FL 32835

Secretary: CATHERINE B. WAY

Address: 917 SUMMER LAKES DRIVE
ORLANDO, FL 32835

Treasurer: CATHERINE B. WAY

Address: 917 SUMMER LAKES DRIVE
ORLANDO, FL 32835

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Catherine B. Way
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. CATHERINE B. WAY, PRESIDENT
(Typed or printed name and capacity of person signing application)

File Number 5940-710-4

STATE OF ILLINOIS

OFFICE OF THE SECRETARY OF STATE

FILED
98 JUL 31 PM 12:4
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To all to whom these Presents Shall Come, Greeting:

I, George H. Ryan, Secretary of State of the State of Illinois,

do hereby certify that HARPSTRINGS, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE MAY 8, 1997, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE FILING OF ANNUAL REPORTS AND PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS********

SEAL OF THE STATE OF ILLINOIS
AUG. 26TH 1818

In Testimony Whereof, *I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois this* 21ST *day of* JULY *A.D., 19* 98

George H Ryan

SECRETARY OF STATE

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