### TRANSMITTAL LETTER

To:	Qualification/Tax Lien Section
	Division of Comomtions

FIRST CLASS INC.

(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:

SANDRA BURTON	5000026009055 -07/28/9801087-001 
(Name of Person)	本本本本本 [0 , 10 ******** [0 , 10
FIRST CLASS, INC.	Pro 19
(Firm/Company)	T M &
9043 SARAH DRIVE	98 AUG -
(Address)	13-
POIK City, FL 33868	
(City/State/Zip)	STAC
	06 RIDA

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

at (941) 984-4075
(Area Code & Daytime Telephone Number)

W98-17177

### **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



### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 29, 1998

SANDRA BURTON FIRST CLASS, INC. 9043 SARAH DRIVE POLK CITY, FL 33868

SUBJECT: FIRST CLASS, INC. Ref. Number: W98000017177



We have received your document for FIRST CLASS, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Simply adding "of Florida" or "Florida" to the end of a name 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: 798A00039802

# RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned Saudea L Burtow (Name)	_, do hereby certify
that this Resolution of the Board of Directors of	
(Corporate Name)	-
a corporation duly organized and existing under the laws of the State of	diana.
was duly adopted on August 4	
Be it resolved, that FIRST CLASS, Inc. (Corporate Name)	
organized and existing in the State of Indiana, here	
FIRST CLASS Services OF Indiana. Inc.	for use in Florida.
Dated: <u>P-4-98</u>	
Signature of either Chairman, Vice Chairman or any officer	AH 8: 06
SAUDRA L. BURTON Type or print name	NTE - 06

INHS19(4/96)

## 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. FIRST CLASS, TNC.  (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. India Na 3. 35-1727659 (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 12-23-87 5. Perperual (Duration: Year corp. will cease to exist or "perpetual")
6
7. P.O. Box 898
POIK C. TY FL 33868 (Current mailing address)
8. <u>Ser yice oriented</u> , <u>olelivery olviving</u> , <u>Misc. Contracting</u> (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: SAUDLA BUETON  Office Address: 9013 SALAL De.  POIN City, Florida, 33868 (Zip code)  (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 and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptal	ble)
A. DIRECTORS (Street address only - P.O. Box NOT acceptable)	
Chairman:	
Address:	· · · · · · · · · · · · · · · · · · ·
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	
President: NANDEA BURTON	-1-T-1
Address: 9043 SARAH De. BIK City FL 33868	<del>7</del>
POIK City FL 33868	LC A TI
Vice President:	ASE I
Address:	
	8: 0 LORA: 0
Secretary: O. WAYDE BURTON	Dri 7
Address: 9043 SARAN DR.	
POIK C. 44, FL 33868	
Treasurer:	
Address:	
	-
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or	directors
13. Sandra L. Durton	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the app	lication)
14. SANDRA L. BURTON	
(Typed or printed name and capacity of person signing application)	

### STATE OF INDIANA

### OFFICE OF THE SECRETARY OF STATE

### CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

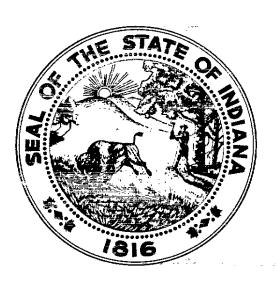
I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

### FIRST CLASS, INC.

filed Articles of Incorporation on December 23, 1987, and is a corporation duly organized and existing under and by virtue of the laws of the State of Indiana.

I further certify this corporation has filed its most recent annual report required by Indiana law with the Secretary of State, or is not yet required to file such annual reports, and that Articles of Dissolution have not been filed.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Minth day of July, 1998.

Sue Anne Gilroy, Secretary of State

Deputy