

F98000004575

FILING COVER SHEET

REFERENCE: 0158. 3396
DATE: 8-7-98
CONTACT: CINDY HICKS
FROM: CORPORATE & CRIMINAL RESEARCH SERVICE
103 N. MERIDIAN STREET
TALLAHASSEE, FL 32301
TELEPHONE: 222-1173
SUBJECT: GMC Operating Corp.

FILED
98 AUG -7 PM 3:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
98 AUG -7 AM 11:53
DIVISION OF CORPORATION

STATE FEES PREPAID WITH CHECK # 2971 FOR \$ 122.50

PLEASE FILE:

- | | | |
|---|--|--|
| <input type="checkbox"/> ARTICLES OF INC. | <input type="checkbox"/> AMENDMENT | <input type="checkbox"/> DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input checked="" type="checkbox"/> QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> ANNUAL REPORT |
| <input type="checkbox"/> FICTITIOUS NAME | <input type="checkbox"/> LIMITED LIABILITY | <input type="checkbox"/> REINSTATEMENT |
| <input type="checkbox"/> TRADEMARK/SERVICE | <input type="checkbox"/> UCC-1 | <input type="checkbox"/> UCC-3 |

PROVIDE US WITH:

- ☒ CERTIFIED COPY ☐ CERTIFICATE OF STATUS ☐ STAMPED COPY

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****122.50 ****122.50

8/7/98

Examiner's Initials

**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. GMG Operating Corp.

(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. Delaware

(State or country under the law of which it is incorporated)

3. 77-0490347

(FEI number, if applicable)

4. July 28, 1998

(Date of Incorporation)

5. Perpetual

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

6. August 13, 1998

(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)

7. 16100 Jaqueline Court, Morgan Hill, CA 95037

(Current mailing address)

8. Wholesale Distribution

(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 Box **NOT** acceptable)

Name: National Registered Agents, Inc.

Office Address: 526 E. Park Avenue

Tallahassee, FL

, Florida, 32301

(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.

C. Buck
(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.

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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: Joseph F. Keenan

Address: 16100 Jaqueline Court, Morgan Hill, CA 95037

Vice Chairman: _____

Address: _____

Director: Joseph Piazza, Sr.

Address: 16100 Jaqueline Court, Morgan Hill, CA 95037

Director: James J. Kelly, Jr.

Address: 16100 Jaqueline Court, Morgan Hill, CA 95037

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

President: Joseph Piazza, Sr.

Address: 16100 Jaqueline Court, Morgan Hill, CA 95037

Vice President: James J. Kelly, Jr.

Address: 16100 Jaqueline Court, Morgan Hill, CA 95037

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. Joseph Piazza, Sr.

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Joseph Piazza, Sr., President

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

State of Delaware
Office of the Secretary of State

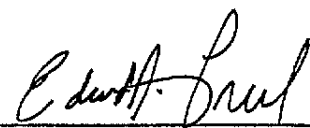
PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GMG OPERATING CORP." 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 TWENTY-NINTH DAY OF JULY, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA




Edward J. Freel, Secretary of State

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AUTHENTICATION: 9224034

DATE: 07-29-98