F9800000 4877

To: Qualification/Tax Lien Section Division of Corporations
SUBJECT: Landscope DeSign Associates, Inc. (Name of corporation - must include suffix) 100002614671==1
Dear Sir or Madam: -08/13/28-010/40-002 -08/13/28-010/40-0000 -08/13/28-010/40-0000 -08/13/28-010/40-0000 -08/13/28-010/40-0000 -08/13/28-010/40-0000 -08/13/28-010/40-0000 -08/13/28-010/40-0000 -08/13/28-0000 -08/13/28-0000 -08/13/28-0000 -08/13/28-0000 -08/13/28-0000 -08/13/28-0000 -08/13/28-0000 -08/13/28-000000 -08/13/28-0000 -08/13/28-0000 -08/13/28-0000 -08/13/28-0000 -08/13/28-0000 -08/13/28-0000 -08/13/28-0000 -08/13/28-0000 -08/13/28-0000 -08/13/28-0000 -08/13/28-0000 -08/13/28-00000 -08/13/28-0000 -08/13/28-0000 -08/13/28-0000 -08/13/28-0000 -08/13/28-00000 -08/13/28-0000 -08/18/28-0000 -08/18/28-0000 -08/18/28-0000 -08/18/28-0000 -08/18/28-0000 -08/18
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:
Gal M. Underwood (Name of Person)
Landscape Design Associates Inc (Firm/Company)
P.O. Box 398
Smithtoun, NV 11787
(City/State/Zip)
-148-14320
Should you need to call someone concerning this matter, please call:
(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

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SECRETARY OF STATE
IVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 17, 1998

GAIL M. UNDERWOOD LANDSCAPE DESIGN ASSOCIATES, INC. PO BOX 398 SMITHTOWN, NY 11787

SUBJECT: LANDSCAPE DESIGN ASSOCIATES, INC.

Ref. Number: W98000016320

We have received your document for LANDSCAPE DESIGN ASSOCIATES, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$70.00.

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please complete the enclosed 2nd page of the application setting forth the names and addresses of the officers/directors. An officer/director must sign section 13.

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) 487-6092.

Hart Collins Senior Corporate Section Administrator

Letter Number: 998A00038131



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

August 13, 1998

GAIL M. UNDERWOOD LANDSCAPE DESIGN ASSOCIATES, INC. PO BOX 398 SMITHTOWN, NY 11787

SUBJECT: LANDSCAPE DESIGN ASSOCIATES, INC.

Ref. Number: W98000016320

We have received your document for LANDSCAPE DESIGN ASSOCIATES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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) 487-6092.

Hart Collins Senior Corporate Section Administrator

Letter Number: 698A00042119

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. (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.) law of which it is incorporated) Year corp. will cease to exist or "perpetual") (Date of incorporation) (SEE SECTIONS 607.1501, 607.1502 and 817.155. F.S.) (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: Office Address: 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 designatedin 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 acceptable) 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: Address: 🖆 Vice President: Address: _ Secretary: _ Address: Treasurer: Address: **NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors. Chairman, or any officer listed in number 12 of the application)

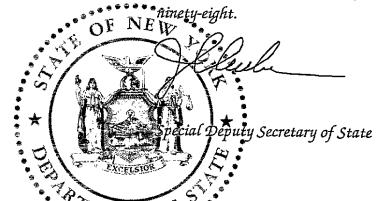
(Typed or printed name and capacity of person signing application)

State of New York Department of State | ss:

I hereby certify, that the certificate of incorporation of LANDSCAPE DESIGN ASSOCIATES, INC. was filed on 05/16/1995, with perpetual duration, and that a diligent examination has been made of the index of corporation papers filed in this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

The Corporation Biennial Statement is past due.

Witness my hand and the official seal of the Department of State at the City of Albany, this 30th day of June one thousand nine hundred and



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DIVISION OF CORPORATIONS