To: Qualification/Tax Lien Section Division of Corporations

THANSMITT LLETTER	
To: Qualification/Tax Lien Section Division of Corporations	
SUBJECT: <u>Onkerschurral Seden and Walkefing</u> , (Name of corporation - must include suffix)	Inc .
Dear Sir or Madam:	
Please return all correspondence concerning this matter to the following: -07/31/3 *****70	
(Name of Person)	W98-17469
(Firm/Company)	(
(Address)	
Onch, 015 99518 (City/State/Zip)	

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

(Name of Person) at (GO7) 563-10088

(Area Code & Daytime Telephone Number)

STREET 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 98 AUG 31 AH 9: 37

SECRETARY STATE
TART AHASSEE FLORIDA



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 31, 1998

JOE SEAMAN 520 W 58TH AVE. SUITE J ANCHORAGE, AK 99518

SUBJECT: INTERNATIONAL SALES & MARKETING, INC.

Ref. Number: W98000017469

We have received your document for INTERNATIONAL SALES & MARKETING, 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 name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

A brief description of the entity's nature of business must be included in the document.

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) 487-6958.

Lee Rivers Document Specialist

Letter Number: 498A00040385



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

August 18, 1998

JOE SEAMAN 520 W 58TH AVE. SUITE J ANCHORAGE, AK 99518

SUBJECT: INTERNATIONAL SALES & MARKETING OF ALASKA, INC.

Ref. Number: W98000017469

We have received your document for INTERNATIONAL SALES & MARKETING OF ALASKA, 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):

Thank you for submitting the name resolution. You must still complete line 8 of your application, as requested in our previous letter, a copy of which is attached.

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) 487-6958.

Lee Rivers Document Specialist

Letter Number: 698A00042652

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned <u>JOC SCOMON</u> (Name)	, do hereby certify	
that this Resolution of the Board of Directors of		90-
International Sales and Marketing	,100	
a corporation duly organized and existing under the laws of the State of	algska,	
was duly adopted on		-
Be it resolved, that International Sales and me		
organized and existing in the State of <u>CIGSKC</u>	, hereby adopts the name	
international Sales and marketing of Class	for use in Florida. 7 SECALE AUG	(ఆయ్లాలక్షి
Dated: _8/5/98	ASSI	
Signature of either Chairman, Vice Chairman or any office	AM 9: 37 E FLORIDA	_
TOE SCAMAN Type or print name	 .	

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. Internation & Sales and marketing 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. Claska
(State or country under the law of which it is incorporated)

4. The state of incorporation (Duration: Year corp. will cease to exist or "perpetual") 6. 7/3/98 (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 8. (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: Lester L Bushozan 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 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.

Lester L Bushr

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.

(Registered agent's signature)

Director: Address: B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: OPE STANCE Address: SOME STANCE Address: Some CS Charle Secretary: Harrey Archel Address: Some OS Olance NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 4. Secretary: P.O. Box NOT acceptable) President: OPE STANCE SOME OS OLANCE NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	12. Names and a	addresses of officers and/or directors: (Street address ONLY - P.O. Box NO	OT acceptable)
Address: Director: Address: Director: Address: Director: Address: Director: Address: B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: DO Samo Star Old	•		•
Address: Director: Address: Director: Address: B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: DOMAN OK 99518 Fice President: DOMAN O	Chairman:	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
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Director: Address: B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: Address: Suman Suma	Vice Chairman:		
Director: Address: B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: Address: Suman Suma	Address:		
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Director: Address: B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: \[\text{JOC. Station} \\ \text{Address:} \\ \text{JOC. Station} \\ \text{Address:} \\ \text{JOC. Station} \\ \text{Address:} \\ \text{JOC. President:} \\ \text{DIV. GNASYN \\ \text{Address:} \\ \text{Secretary:} \\ \text{Address:} \\ \text{Address:} \\ \text{Secretary:}	Address:	·	SST
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B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: D.C. Starran Address: Starran	Director:		
Address: 520 \ 5840 CVR \ SUL \ 20 \ T ONLY OK 99518 Vice President: Den Goderson Lesker Address: Seme as above Secretary: Harrier Harrier Harrier Address: Secretary: Harrier Address: Seme as above NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 3. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 4. July Second - Drevident	Address:		
Address: Spine OS Alas/e Treasurer: Harry Hanks Address: Spine OS Obove NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 3. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 4. Second - President	Address:	20 N5841 CVE, Sulta) J anch, GK 99518 John Godenson Lester	
Address: Spine OS Obole Address: Spine OS Obole NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 3. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 4. Secondo - Stephiller 1	Secretary:	ane frankel	· ·
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3. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 4. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	Address:	SAME CS OLONE	
4. Joe Seaman - President	3	21/	
	i	(Signature of Chairman, vice Chairman, or any officer listed in number 12	of the application)
	4	(Typed or printed name and capacity of person signing ap	

State of Alaska Department of Commerce and Economic Development Division of Banking, Securities and Corporations

CERTIFICATE OF COMPLIANCE

The undersigned, as Commissioner of Commerce and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby certifies that

INTERNATIONAL SALES & MARKETING, INC.

on July 28, 1998 filed in this office its Articles of Incorporation, as a business corporation organized under the laws of this State.

I FURTHER CERTIFY that said corporation is in good standing and has filed all biennial corporate reports due at this time and has paid all biennial corporation taxes and fees due and payable at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.

IN TESTIMONY WHEREOF, T execute this certificate and affix the Great Seal of the State of Alaska on July 29, 1998

Deborah B. Sedurch

Deborah B. Sedwick Commissioner of Commerce and Economic Development