# F-980000004949

Qualification/Tax Lien Section

TO:

Division of Corporations	
SUBJECT: Buchine Voge / fang (Name of corporation - must inc	
Dear Sir or Madam:	800026266488 -08/27/9801052004 ****131.25 ****131.25
The enclosed "Application by Foreign Corporation for Au Florida", "Certificate of Existence", and check are submit foreign corporation to transact business in Florida.	ted to register the above referenced $\frac{19743}{1}$
Please return all correspondence concerning this matter to	the following:
J; 11 Vogelf (Name of Person)	ang
· ·	rests Inc. dba Team Source
4635 Southwest Fr (Address)	reeway Snite 540 99/1
Houston, Texas (City/State/Zip)	77027 SECRETAF
Should you need to call someone concerning this matter, p	PH 2: 170 STATE  PH 2: 10 STATE    Control of the c
Edward R. Watson (Name of Person)	at (7/3) F7/ -/5F2 (Area Code & Daytime Telephone Number)

#### **COURIER ADDRESS:**

Qualification/Tax Lien Sec. 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



Jill Vogelfang President

August 26, 1998

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St. Tallahassee, FL. 32399

Please find enclosed the application for registration for Buchine/Vogelfang Interest Inc. to transact business in the State of Florida. I have enclosed funds for the \$70.00 registration fee, \$8.75 for a certificate of status and \$52.50 for a certified copy.

Sincerely,

Jill Vogelfang, President

98 SEP -1 PH 12: 1.1

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

August 28, 1998

JILL VOGELFANG BUCHINE/VOGELFANG INTERESTS, INC. 4635 SOUTHWEST FREEWAY, STE. 540 HOUSTON, TX 77027

SUBJECT: BUCHINE/VOGELFANG INTERESTS, INC.

Ref. Number: W98000019743

We have received your document for BUCHINE/VOGELFANG INTERESTS, INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.)

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) 487-6095.

Jennifer Sindt Document Examiner

Letter Number: 298A00044565

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

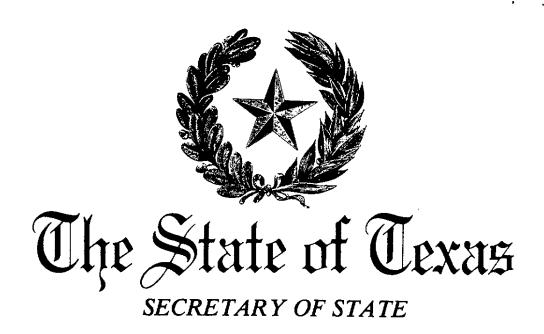
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	Buckine / Vose/fans Interests 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.	Texas (State or country under the law of which it is incorporated)  3. 76-05020\$f1 (FEI number, if applicable)
4.	(Date of Incorporation)  5. Perpetual  (Duration: Year corp. will cease to exist or "perpetual")
	(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)
7.	Houston, Texas 77027 (Current mailing address)
	Management Consulting Services  (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)  Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
	Name: Adele Hurwitz 88 Sisses Office Address: 23 Abbey Lane Suite 107
10.	Del Ray Beach, Florida, 334462 (Zip Code) No. (Zip Code) No.
coi reg all	twing been named as registered agent and to accept service of process for the above stated reporation at the place designated in this application, I hereby accept the appointment as sistered agent and agree to act in this capacity. I further agree to comply with the provisions of statutes relative to the proper and complete performance of my duties, and I am familiar with daccept the obligations of my position as registered agent.
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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)

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: Jill Vogelfang  Address: 4635 Southwest Freeway #540	7 A
Address: 4635 Southwest Freeway #540	
Houston, Texas 77027	
Vice Chairman: Mark Buchine  Address: 4635 Southwest Freeway #540	,
Address: 4635 Southwest Freeway 540	e e e e e e e e e e e e e e e e e e e
Honston, Texas 77027	. The second of
Director:	2 Marion States
Address:	. 7 / ag <del></del>
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Director:	was a second
Address:	: · ·
	च्चार क्षेत्रक क्षेत्रक व
B. OFFICERS (Street address only- P. O. Box NOT acceptable)	
President:	
Address:	ζ Ξ
	SS 25
	SECRE VISION
Vice President:	SECRETAR VISION CF
	SECRETARY OF VISION OF TORING
Vice President:  Address:  P	SECRETARY OF STA
Vice President:  Address:  Secretary:	SECRETARY OF STATE VISION OF STATE OF STATE
Vice President:  Address:  P	SECRETARY OF STATE
Vice President:  Address:  Secretary:  Address:	SECRETARY OF STATE
Vice President:  Address:  Secretary:  Address:  Treasurer:	SECRETARY OF STATE
Vice President:  Address:  Secretary:  Address:	SECRETARY OF STATE
Vice President:  Address:  Secretary:  Address:  Treasurer:	SECRETARY OF STATE
Vice President:  Address:  Secretary:  Address:  Treasurer:  Address:  NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	SECRETARY OF STATE
Vice President:  Address:  Secretary:  Address:  Treasurer:  Address:  NOTE: If necessary, you may attach an addendum to the application listing additional	SECRETARY OF STATE VISION OF STATE



#### IT IS HEREBY CERTIFIED that Articles of Incorporation of

### BUCHINE/VOGELFANG INTERESTS, INC. File No. 1388780-00

were filed in this office and a certificate of incorporation was issued to this corporation, and no certificate of dissolution is in effect and the corporation is currently in existence.

HERMAS

IN TESTIMONY WHEREOF, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in the City of Austin, on August 14, 1998.

'f Sampler

Alberto R. Gonzales Secretary of State