F98000005594 TRANSMITTAL LETTER

Qualification/Tax Lien Section To: Division of Corporations MID-CONTINENTAL SECURITIES CORPORATION (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: MARK ANTHONY
(Name of Person) MID-CONTINENTAL SECURITIES CORP.
(Firm/Company) 835 BENTWATER CIRCLE, #201
(Address) NAPLES, FL 34108
(City/State/Zin) Should you need to call someone concerning this matter, please call: (Name of Person) at (941) 592-6975 (Name of Person) (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

SECRETARY OF STATE DIVISION OF CORPORATIONS

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.	mio-	CONTINENTAL	- SECURIT	ies co	RP.			
1	words or abbrev	ration; must include the intions of like import in partnership if not so o	n language as will	clearly indica	ate that it is a comp	ORPORATION" of oration instead of	Г Ө.	
2. <u>.</u>	ILL	NOIS	. 24 2. 2	3	36-370	6151 mber, if applicable		-
(•				
4	5//	o/90 e of incorporation)	5	PE	KPETUAL	tist "		#\
6	(Dat ANT	e of incorporation) 7CIPATED transacted business in	10/1/98	(Dinguon:	rear corp. will c	ease to exist of pe	1petuai	,
٠	(Date first	transacted business in	Florida.) (SEE SE	CTIONS 607	.1501, 607.1502 a	and 817.155, F.S.)		
7	835	BENTWATE	R CIRCLE	#20	1			
		ZES, FL		•				
•		,	(Current mailing	g address)				
8	C01	VSULTING (s) of corporation autho	FIRM	or country t	o be carried out in	state of Florida)		
9.]		eet address of Florid					rtable)	
	Name:	MARK H	INTHONY					<u>.</u>
Off	fice Address:	835 BEN	TWATER O	CIRCLE	,#201		98 OCT	SECRI
		NAPLES,	FL	· · · · · · · · · · · · · · · · · · ·	Florida, <u>341</u>	08		异型
					(Zip co	ode)	7	용우면 왕우면
	_	gent's acceptance:					-7 PM12: 1	STATE ORATIO
in t	this application, uply with the p	ed as registered agent of the agent of the agent of all statutes igations of my position	ppointment as regi relative to the pro	stered agent per and com nt.	and agree to act i plete performanc	in inis capacity. 1	juriner	agree w

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. DIRECTO	RS (Street address only - P.O. Box NOT acceptable)
Chairman:	MARK ANTHONY
Address: 8	35 BENTWATER CIRCLIE, #201
	VAPLES, FL 34108
Vice Chairman	· <u>N/A</u>
Address:	
Director:	MARK ANTHONY
Address:	835 BENTWATER CIRCLE, # 201
	NAPLES, FL 34108
Director:	N/A
Address:	
,,,,,	TO TO MOTE AND A LIAN
	RS (Street address only - P.O. Box NOT acceptable)
President:	MARK ANTUONY
	835 BENTWATER CIRCLE, #201
	NAPLES, FL 34108
Vice President	: N/A
Address:	
Secretary:	MICHELLE SUPPES
Address:	835 BENTWATER CIRCLE, #201
	NAPLES, FL 34108
Treasurer:	N/A
Address:	
NOTE: If n	ecessary, you may attach an addendum to the application listing additional officers and/or directors.
13.	(Signature of Chairman, Vise Chairman, or any officer listed in number 12 of the application)
-	
14. <u>M</u>	ARK ANTHONY (Typed or printed name and capacity of person signing application)

File Number 5596-979-5



To all to whom these presents Shall Come, Greeting:

I, George H. Ryan, Secretary of State of the State of Illinois,

do hereby certify that MID-CONTINENTAL SECURITIES CORP., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE MAY 21, 1990, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THE FILING OF THE PROVIDED TO THE ANNUAL REPORTS AND PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF



In Testimony Mhereof, I herele my hand and cause to be affixed the Great Seal of the State of Illinois this