

C T CORPORATION SYSTEM				
660 East Jefferson Str	eet			
Requestor's Name	2201			
<u>Tallahassee</u> , Florida 3 Address				
(850) 222–1092	Phone		00026670	1731
City State Zip	Filone		-10/19/9801(089004 *****70.00
CORPOR	ATION(S) NAME			
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			98000	DIVISION SECON
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Document Examiner	OCT 1 9 1998		Thanks, Melanie	$\dot{\omega}$
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Acknowledgment				
W.P. Verifier	· · -			
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CR2E031 (1-89)

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION 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:

	et, Inc.		-		-
(Name of corporation abbreviations of like i or partnership if not s	mport in language as	s will clearty indica			
2. <u>Delaware</u> (State or country und	er the law of which it	is incorporated)	:	3. Applied F (FEI/number, if	applicable)
4. July 1.	1997	5 . per	petual		-
(Date of incorpo	1997 pration)	(Du	ration: Year corp. wil	Il cease to exist or "	perpetual") 😐
6. <u>upon qua</u> (Date first transacted	lification				OCT SER
(Date first transacted	business in Florida.	(See sections 607	.1501, 607.1502, an	d 817.155, F.S.)	
					- 300 - 300
7. 4295 Sou	th Bellaire	Circle			T OR
Engelwoo	d, Colorado	80110	_	_	OF STATE SPORATION PM 12: 40
<u> </u>	(Current mailing				5 25 -
				_	,
8. Any lawfu (Purpose(s) of corpor Florida) 9. Name and street a	ation authorized in h	ome state or coun	try to be carried out	rations may in the state of	<u>be organi</u> zed
(Purpose(s) of corpor Florida) 9. Name and street a	ation authorized in h	ome state or coun	try to be carried out	rations may in the state of	<u>be organ</u> ized
(Purpose(s) of corpor Florida) 9. Name and street a	ation authorized in h	ome state or coun registered agent:	try to be carried out	in the state of	be organized
(Purpose(s) of corpor Florida) 9. Name and street a	ation authorized in h	ome state or coun registered agent:	try to be carried out	in the state of	be organized
(Purpose(s) of corpor Florida) 9. Name and street a	ation authorized in haddress of Florida in CT CORPORATION C/o CT Corporation	ome state or coun registered agent: ON SYSTEM on System, 1200 S	try to be carried out	in the state of	be organized
(Purpose(s) of corpor Florida) 9. Name and street a	ation authorized in h	ome state or coun registered agent:	try to be carried out	in the state of	be organized
(Purpose(s) of corpor Florida) 9. Name and street a	ation authorized in haddress of Florida in a CT CORPORATI C/o CT Corporation Plantation t acceptance: registered agent and incation. I hereby accepted agent and accept the obligation of the college of the obligation.	registered agent: ON SYSTEM ON SYSTEM ON System, 1200 S ————, Florida, ——— of to accept service ept the appointment of all statutes relation C T CORPORATIO	couth Pine Island Ro 33324 (Zip Code) of process for the and as registered agent in as registered agent in as registered agent	in the state of ad bove stated corpora t and agree to act in complete performa	dion at the place
(Purpose(s) of corpor Florida) 9. Name and street a Name Office Address 10. Registered agent Having been named as designated in this application further agree to comply	ation authorized in haddress of Florida in address of Florida in a CT CORPORATION of CT Corporation acceptance: It acceptance: It registered agent and ication. I hereby accept with the provisions of and accept the obligation (Registered)	registered agent: ON SYSTEM On System, 1200 S ————, Florida, —— of to accept service ept the appointment of all statutes relation of my position	couth Pine Island Ro 33324 (Zip Code) of process for the and as registered agentine to the proper and as registered agentine to the proper and as registered agentine to the proper and as registered agent ON SYSTEM	in the state of ad bove stated corpora t and agree to act in complete performa	dion at the place

- 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:

hw.	DIRECTORS (Street address only - P.O. Box NOT acceptable)
	Chairman:
	Address:
	Vice Chairman:
	Address:
	Director: Steven R. Kranich
	Address: 4295 South Bellaire Circle
	Engelwood, Colorado 80110
	Director:
	Address:
	OFFICERS (Street address only - P.O. Box NOT acceptable)
	President: Steven R. Kranich
	Address: 4295 South Bellaire Circle
	Engelwood, Colorado 80110
	Vice President:
	Address:
	Secretary: Steven R. Kranich
	Address: 4295 South Bellaire Circle
	Engelwood, Colorado 80110

CT 19 PM12: 41

12:43 AUG 13, 1998 ID: CT CORPORATION TEL NO: 1 (212) 247-2882

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reasurer:	Steven R. Kranich
Address:	4295 South Bellaire Circle
	Engelwood, Colorado 80110
and/or directors.	may attach an addendum to the application listing additional officers
13. (Signature of Chairman application)	n, Vice Chairman, or any officer listed in number 12 of the
14. <u>Steven R. Kra</u>	anich, Director e and capacity of person signing application)

State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ZAP SUNSET, INC." 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 A.D. 1998.__

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.





Edward J. Freel, Secretary of State

AUTHENTICATION:

2768631 8300

DATE:

10-09-98

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