## F98000006327

TRAI	NSWITTAL LETTER	
To: Qualification/Tax Lien Section Division of Corporations  SUBJECT: Pho2010 (Name	management of corporation anust include suffix	Group, Inc.
Dear Sir or Madam:		
The enclosed "Application by Foreign Co "Certificate of Existence", and check are transact business in Florida.  Please return all correspondence concerni	submitted to register the above letere	nct Business in Florida", nced foreign corporation to 000026895423 -11/17/9801055005 *****78.75 *****78.75
<del>Secre</del>	(Name of Person)	
Yhazon_	(Firm/Company)	roop, me
306 NE	E ) Ave. (Address)	<del>- # (m v)</del> - * * * * * * * * * * * * * * * * * *
Fort L	auderdale, s (City/State/Zip)	<u> </u>
Should you need to call someone concer (Name of Person)	ning this matter, please call:  at ( <u>SOO</u> ) 72803  (Area Code & Daytime Tele	<b>→</b> 2
COURIER ADDRESS:	MAILING ADDRI	ess:
Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	Qualification/Tax L Division of Corpora P.O. Box 6327 Tallahassee, FL 32	11/17

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

- IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMIT. REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	TED TO	
- LC:		
1. Pho 7 on Mondolmen T Cyou, 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 discard of a		
natural person or partnership if not so contained in the name at present.)		
2 DOLUNIO VO. 3. 113459089	<u>.                                    </u>	
(State or country under the law of which it is incorporated) (FEI number, if applicable)		
4. 10-13-98 5. <u>Levoetual</u>		
(Date of incorporation) (Duration: Year corp. will cease to exist or "perp	emar)	
6. (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)		<u> </u>
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 677.1507	98 N	SEC Sign
7. 306 NE 11 AVE.		
FOXTLAUDEVAALE, JTA 35001 (Current mailing address)		
(Curent maning address)	PM 3:	ું જુ
* management Services	<u></u>	ATE ATE
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)		Š
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT accepta	able)	
Name: <u>George Smith</u>	,	
Office Address: 30 6 NE 11 AVE		_
Et landoudale Florida 3330)		
(Zip code)	· · .	** #
10. Registered agent's acceptance:		
Having been named as registered agent and to accept service of process for the above stated corporation at to in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. If	urmer ug	166 10
comply with the provisions of all statutes relative to the proper and complete performance of my auties, and	I am fam	illiar with
and accept the obligations of my position as registered agent.		
(Registered agent's signature)		. <b>.</b> .
4-07		

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. DIREC	TORS (Street address only - P.O. Box NOT acceptable)
Chairman:	George F Smith
Address: _	306 NE 11 AVE
	Fort Lauderdale, +1 3330)
Vice Chain	man:
Address: _	
Director:	
Address: _	
Director:	
Address:	•
	on the second of
B. OFFI	CERS (Street address only - P.O. Box NOT acceptable)
President:	George F Smith
Address:	306 NE 11 AVE 910 33301 5 5
	Fort Lauderdale, fla 33301 5 1
Vice Presi	ident:
Address:	
Secretary	Wendy Doherty
Address:	306 NE 11 AVE
	Fort Lauderdale 3/a 33301
Treasurer	
1100000	
	· <u> </u>
Address:	
Address:	
Address:	If necessary, you may attach an addendum to the application listing additional officers and/or directors.
Address:	

## State of Delaware

## Office of the Secretary of State

PAGE :

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "PHAZON MANAGEMENT GROUP 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 RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF
NOVEMBER, A.D. 1998.

SECRETARY OF STATE DIVISION OF STATE OF SCHOOL STATE OF S

Edward J. Freel, Secretary of State

**AUTHENTICATION:** 

DATE: 9390857

11-05-98

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