THE UNITED STATES CORPORATION

ACCOUNT NO. : 072100000032

REFERENCE :

100855

11381A

AUTHORIZATION

COST LIMIT

ORDER DATE: January 15, 1999

ORDER TIME: 10:28 AM

ORDER NO. : 100855-005

100002744071--7

CUSTOMER NO:

11381A

CUSTOMER: Lawrence W. Smith, Esq.

Gary Dytrych & Ryan

Suite 402

701 U.s. Highway 1

North Palm Beac, FL 33408

FOREIGN FILINGS

NAME:

FRANK DECESARE ENTERPRISES,

INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX ___CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Tamara Odom



FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

January 15, 1999

Please date 1-15-99. Thanks.

CSC

SUBJECT: FRANK DECESARE ENTERPRISES, INC.

Ref. Number: W99000001198

We have received your document(s) in this office, however, a copy of the document is being returned for the following:

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please (850) 487-6094.

Agnes Lunt Document Specialist

Letter Number: 399A000022155

99 JAN 15 PM 1: 15

RECEIVED 99 JAN 19 AM 9: 53 DIVISION OF CORPORATION

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.

	DECESARE ENTERPR					<u> </u>		
(Name of corp	oration; must include the	word "INCOF	RPORATED	", "COMPAI	NY", "CORPOR	CATION" or		
	viations of like import in				t is a corporation	n instead of a	ı	
natural person	or partnership if not so c	ontained in the	name at pr	esent.)				
2. DELAWARE			3.	_Applie	d For	<u>-</u>	ē	Ξ
(State or count	ry under the law of which	it is incorpora			(FEI number,	if applicable)		
4 June 18,	1997	5.	Perpet	ıal				
(D	ate of incorporation)		(Duration:	Year corp. w	vill cease to exis	st or "perpetu	al")	 -
6. January	19, 1999			-	- 			· -
	st transacted business in 1	Florida.) (SEE	SECTIONS	607.1501, 6	07.1502 and 81	7.155, F.S.)		
7. <u>c/o</u> DeCes	sare's Restaurant	639 U.S. I	Highway	0ne				
		North Palı		Florida	33408			
		(Current mai	iling address	s)				
		•	Ü	,	·			
8. Any legal	nurnose	-						_
·····	c(s) of corporation author	ized in home s	tate or coun	try to be carr	ied out in state	of Florida)	-	· ·
						•		
9. Name and st	reet address of Florid	a registered :	agent: (P.	O. Box or M	[ail Drop Box]	NOT accept	able)	
Name:	_Frank J. DeCesan	- <u>-</u> -			<i>-</i>		39	
Time.	Traine G. Descella			 ;	مشدده	A		
Office Address:	639 U.S. Highway	7 One				SS.	<u>ග</u>	-
	North Palm Beacl	ı		_, Florida,	33408		JAN 15 PH	
				, , .	(Zip code)		-	O
10 70 14 1						쯢	CB	
10. Kegistered	agent's acceptance:	,				>	٠.	
Having heen nam	ed as registered agent a	ed to accept se	missa of mas	ages for the	house stated and		fT	
in this application	i, I hereby accept the app	pointment as r	egistered ag	ent and agre	e to act in this	canacity. I fi	urther ac	pree to
comply with the p	rovisions of all statutes i	elative to the p	proper and o	complete per	formance of my	duties, and	I am fan	niliar with
and accept the ob	ligations of my position	is registered a	gent.		: 2	±		
	JI	ankle	li Cesa	u	-			-
		(Registered a	gent's signa	ture)		2		

of which it is incorporated.

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

^{12.} Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

irman: _				<u> </u>		
ress:						
	an:				-	
_				 -		
	rank J. DeCesare 39 U.S. Highway One		·····	_	=	
	orth Palm Beach, Florida 33408				· · · · · ·	
ctor: Da	wn DeCesare		-	,		
lress: <u>63</u>	39 U.S. Highway One					
	orth Palm Beach, Florida 33408 ERS (Street address only - P.O. Box NOT acceptable)					<u> </u>
	Frank J. DeCesare			-	= :::	
iress:	639 U.S. Highway One		-			
	North Palm Beach, Florida 33408		===			
e Preside	nt:		SEC	99 J	Section 11 st	
iress:			AHASSE	AH 15		
			EC FL	P = -	O	
retary: iress:	Dawn DeCesare 639 U.S. Highway One			<u></u>		
	North Palm Beach, Florida 33408					
asurer:	Dawn DeCesare				-1-	-
iress:	639 U.S. Highway One					
_	North Palm Beach, Florida 33408	-				
TE: If:	necessary, you may attach an addendum to the application listing additional office	ers and/or	directors	i.		
	Transite Cesare		-			
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of	f the appl	ication)			
·	Frank J. DeCesare, President (Typed or printed name and capacity of person signing app					

State of Delaware Office of the Secretary of State

I. EDWARD J. FREEL. SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FRANK DECESARE ENTERPRISES. INC. IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND HAS A LEGAL CORPORATE EXISTENCE SO FAR THE FIFTEENTH DAY OF AND I DO HERERY FURTHER CERTIFY THAT THE REFORTS HAVE TAXES

Edward J. Freel, Secretary of State

AUTHENTICATION:

9523422

991017809

8300

2763475

DATE:

01-15-99