

F99000002367

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: Passap America, Inc.
(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:

Victoria A. Beckner
(Name of Person)

600002828906--8
-04/05/99--01063--002
***78.75 ***78.75

W99-8045

Passap America, Inc.
(Firm/Company)

600002828906--8
-05/07/99--01133--001
***1150.00 ***1150.00

2200 Winter Springs Blvd, Suite 106-350
(Address)

Oviedo, FL 32765
(City/State/Zip)

Should you need to call someone concerning this matter, please call:

Victoria A. Beckner at (407) 359-5454
(Name of Person) (Area Code & Daytime Telephone Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
29 MAY -7 PM 2:58

mtm
5/7

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

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☒ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

April 5, 1999

VICTORIA A. BECKNER
PASSAP AMERICA, INC.
2200 WINTER SPRINGS BLVD., STE 106-350
OVIEDO, FL 32765

SUBJECT: PASSAP AMERICA, INC.
Ref. Number: W99000008045

We have received your document for PASSAP AMERICA, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report and penalty fees is \$1150.00.

Enclosed please find a copy of section 607.1501 or 617.1501, Florida Statutes, which lists those activities that do not constitute transacting business in this state. If after reviewing this section you determine erroneous information was inserted on the application, a sworn affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business in Florida prior to the year the application was submitted did not constitute transacting business pursuant to section 607.1501 or 617.1501, Florida Statutes.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays
Document Specialist

Letter Number: 999A00017032

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DIVISION OF CORPORATIONS

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**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. Passap America, 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. Georgia 3. 58-222-8385
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 3/27/1996 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. July 1, 1998
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 2200 Winter Springs Blvd, Suite 106-350
Oviedo, FL 32765
(Current mailing address)

8. Wholesale distribution of knitting machines
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: Victoria A. Beckner

Office Address: 1293 Geneva Dr., Suite 121

Oviedo, Florida, 32765
(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 the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Victoria A Beckner
(Registered agent's signature)

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.

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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: Victoria A. Beckner

Address: 770 Bear Creek Circle

Winter Springs, FL 32708

Vice Chairman: N/A

Address: _____

Director: N/A

Address: _____

Director: N/A

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: Victoria A. Beckner

Address: 770 Bear Creek Circle

Winter Springs, FL 32708

Vice President: N/A

Address: _____

Secretary: Victoria A. Beckner

Address: 770 Bear Creek Circle

Winter Springs, FL 32708

Treasurer: Victoria A. Beckner

Address: 770 Bear Creek Circle

Winter Springs, FL 32708

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Victoria A. Beckner

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Victoria A. Beckner, President

(Typed or printed name and capacity of person signing application)

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09 MAY 17 PM 2:58

Secretary of State

Corporations Division

315 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

DOCKET NUMBER : K90610722
CONTROL NUMBER : K611663
DATE INC/AUTH/FILED: 03/27/1996
JURISDICTION : GEORGIA
PRINT DATE : 03/02/1999
FORM NUMBER : 211

SHIRLEY RIVERS
2200 WINTERS SPRINGS BLVD. #106-350
OVIEDO FL 32765

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

PASSAP AMERICA, INC.
A DOMESTIC PROFIT CORPORATION

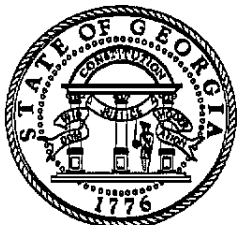
was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation, or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up, or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



CATHY COX
SECRETARY OF STATE



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DIVISION OF CORPORATIONS
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