

	ITTAL LETTER O
To: Qualification/Tax Lien Section Division of Corporations	
SUBJECT: <u> Treasured M</u> (Name of cor	oments, Inc.
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporati "Certificate of Existence", and check are submitt transact business in Florida.	ion for Authorization to Transact Business in Florida", ted to register the above referenced foreign corporation to
Please return all correspondence concerning this	matter to the following:
Penny L.	Lane
`.	Name of Person)
	Moments, Inc.
	irm/Company)
<u>1158 Cour</u>	try Walk Dr
	(Address)
<u>Orange Parl</u>	K, FL 32073 mm
(0	City/State/Zip) $5/25$
Should you need to call someone concerning thi	is matter, please call: 4000288245405/21/9301075001 *****70.00 ******70.1
tenny Lane at (904, 264-5197
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET ADDRESS:	MAILING ADDRESS:
Qualification/Tax Lien Section	Qualification/Tax Lien Section
Division of Corporations	Division of Corporations P.O. Box 6327
409 E. Gaines St. Tallahassee, FL 32399	Tallahassee, FL 32314
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of State	

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. Treasured Moments, 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.) No business transacted as of this date. (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) (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) Office Address: 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.

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. DIRECTORS (Street address only - P.O. Box NOT acceptable)
Chairman: Penny L. Lane
Address: 1758 Country Walk Drive
Crange Park, FL 32073
Vice Chairman: William S. Lane
Address: 1758 Country Walk Drive
Drange Park, FL 32073
Director:
Address:
Director:
Address:
B. OFFICERS (Street address only - P.O. Box NOT acceptable)
President: Penny L. Lane
Address: 1758 Country Walk Drive
Crange, Park, FL 32073
Vice President: William S. Lane
Address: 1758 Country Walk Drive
Orange Park, FL 32073
Secretary: Penny L. Lane
Address: 1758 Country Walk Drive
Orange Airk Fl 32073
Treasurer: Penny L. Lane
Address: 1758 Country Walk Drive
Orange Park Fl 32073
NOTE IS
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. Penny L. Lane, Chairman

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

Secretary of State

Corporations Division 315 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 DOCKET NUMBER : K90761432
CONTROL NUMBER : K824684
DATE INC/AUTH/FILED: 06/22/1998
JURISDICTION : GEORGIA
PRINT DATE : 03/17/1999

FORM NUMBER : 211

TREASURED MOMENTS
PENNY LANE
1758 COUNTRY WALK DRIVE
ORANGE PARK FL 32073

CERTIFICATE OF EXISTENCE

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

TREASURED MOMENTS, 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 1

SECRETARY OF STATE

