# F99000002970

## TRANSMITTAL LETTER

To: Qualific Division	cation/Tax Lien Section n of Corporations		_
SUBJECT:	PinnI	ease USA, Inc.	
	(Name of corpora	ation - must include suffix)	
Dear Sir or Mad			
The enclosed "A "Certificate of E to transact busin	application by Foreign Corporation in its state of the control of	for Authorization to Transactor register the above referen	ced foreign corporation
Please return all	correspondence concerning this ma	tter to the following:	JUN -8
-		en O'Hea	
	(Name	of Person)	œ.
_	Pinn	Fund, USA	22
		Company)	
	2051 Palomor A	irrort Deed Out 10	^
		<u>irport Road, Suite 10</u> idress)	<u> </u>
	0-1110	,	
-	Carlsbad, CA (City/S	92009 State/Zip)	<u></u>
ŕ	to call someone concerning this man	tter, please call:	10028979996 -06/08/9901042004 *****78.75 *****78.75
	A -	) 918–1065 a Code & Daytime Telepho	no Number
STREET ADDR	, (-1	MAILING ADDRESS	,
		MAILING ADDRESS	,
Qualification/Tax Division of Corpo 409 E. Gaines St. Tallahassee, FL	orations	Qualification/Tax Lien Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Section
Enclosed is a chec	ck for the following amount:		
☐ \$70.00 Filing I	_	S \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

### 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. PinnL	ease USA, Inc.		1
words or applic	oration; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or viations of like import in language as will clearly indicate that it is a corporation instead of a or partnership if not so contained in the name at present.)		<del></del>
2. <u>Delaw</u>	3	<u> </u>	·
	( and the state of		
4. <u>March</u>	2, 1999 5 5		
(Da	te of incorporation) (Duration: Year corp. will cease to exist or "perpe	tual")	<del></del> '
6. <u>pendi</u>	ng approval		
(Date firs	t transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)		i -
	Palomar Airport Road, Suite 101, Carlsbad, CA 92009	S	DIV.
	Total, barte 101, carisbad, ca 92009	- ==	
		- 12 · 12	- 11 - 11
	(Current mailing address)	င်ာ	
		7	# <u>2</u> 9
8. Equipm	ent leasing	.00	
(Purpose	s) of corporation authorized in home state or country to be carried out in state of Florida)	22	5.0
9. Name and str	eet address of Florida registered agent: (P.O. Box or Mail Drop Box NOT accep	-11.\ -11.\	# *** ****
		table)	
Name:	CT Corporation System, Registered Office	- · · · · ·	÷ 1,44 ;
Office Address:	1200 South Pine Island Road		
	Plantation , Florida, 33324		
	(Zip code)	••	
10 70	· ·		
10. Registered a	gent's acceptance:		
with the provisions	d as registered agent and to accept service of process for the above stated corporation at the areeby accept the appointment as registered agent and agree to act in this capacity. I further of all statutes relative to the proper and complete performance of my duties, and I am family position as registered agent.  By:  DE. HICKEY  (Registered agent's signature)  ASSISTANT SECRETARY		
	and the second s		
<ol> <li>Attached is a condensation</li> <li>Department of State</li> </ol>	ertificate of existence duly authenticated, not more than 90 days prior to delivery of this applicable than 90 days prior to delivery of this applicable than 90 days prior to delivery of this applicable to the secretary of State or other official basis.	ation 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

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

which it is incorporated.

Chairman: _	S	ee E	xhibi	t "A"	whi	<u>ch i</u>	s att	ached	heret	and.	inco	rporat	ed h	erein	. by	this	refe	ren
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— Director:															ر	00 1111	25	<u> </u>
Address: _																		
3. OFFIC	CER	S (St	reet ad	dress	only	- P.O	. Box	NOT a	cceptabl	e)			<del></del> .					
resident: _											linco	rpora	ted h	ereir	ı by	çe Edii V	s refe	ren
Address:																		
– Vice Presid	lent:			<u>.</u>					,	<del></del>								
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Secretary: _					-				<del></del>								F	
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		(Sig	nature	of <b>Q</b> nai	irman,	Vice	Chairm	nan, or a	ny officer	listed i	in numb	er 12 of	the ap	plicatio	n)			
14						S	I ar me	Kels	all V.	Secre	etarv							

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

## EXHIBIT A TO

#### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA PINNLEASE USA, INC. DIRECTOR/OFFICER LIST

NAME	TITLE	BUSINESS ADDRESS	
Michael J. Fanghella	Director Treasurer	2051 Palomar Airport Road, Suite 101 Carlsbad, CA 92009	
Keith G. Grubba	Director Vice President	2051 Palomar Airport Road, Suite 101 Carlsbad, CA 92009	
Samuel Kelsall V	Director Secretary	2051 Palomar Airport Road, Suite 107 Carlsbad, CA 92009	
Tommy A. Larsen	President	2051 Palomar Airport Road, Suite 101 Carlsbad, CA 92009	

## State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PINNLEASE USA, 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 NINETEENTH DAY OF MAY, A.D. 1999.

**AUTHENTICATION:** 

9752843

05-19-99 DATE:

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991194005