Decument Number Only 000006744 C T CORFORA 660 East Jefferson Street Requestor's Name Tallahassee, Florida 32301 Address (850) 222-1092 700003081947--1 Phone -12/28/99--01051--024 State Zip City \*\*\*\*\*70.00 \*\*\*\*\*\*70.00 CORPORATION(S) NAME #1993-65024 Profit () Merger diss 9/24/99 () Amendment NonProfit Limited Liability Company () Mark ( ) Dissolution/Withdrawal Foreign namo hold I yr. ( ) Other () Annual Report ( ) Limited Partnership () Change of R.A. ( ) Fict. Filing () Reinstatement ( ) Fict. Filing Cancel ( ) UCC-1 ) Limited Liability Partnership r) CUS ) Photo Copies ( ) Certified Copy ( ) After 4:30 () Call if Problem () Call When Ready Pick Up () Will Wait Walk In () Mail Out Please Return Extra Copy(s) Name Filed Stamp Availability Document Thanks, Melanie Examiner Updater Verifier Acknowledgment 99 DEC 28 PH IZ: 36 W.P. Verifier BECEINED CR2E031 (1-89)



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 28, 1999

CT CORPORATION SYSTEM ATTN: MELANIE STRICKLAND WALK-IN,

SUBJECT: KEATON, INC. Ref. Number: W99000029517

We have received your document for KEATON, INC. and your check(s) fotaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

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

If you have any questions concerning the filing of your document, please call (850) 487-6918.

Nanette Causseaux Corporate Specialist Supervisor

Letter Number: 199A00060445

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This Qual needs dated as to be back dated to be back as to be back as to be to

Please por as you can.

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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- 313 593 7579 TO 9-011-523-222-58 F.0Z/02 צאיט אר בופן באר מפים

רו היא האלוו והא אליודע /

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

## RESOLUTION OF BOARD OF DIRECTORS

OF KEATON, INC.

I, the undersigned ALBERT SCAGLIONE	, do hereby certify
that this Resolution of the Board of Directors of : KEATON, INC.	
a corporation duly organized and existing under the laws of the State	of <u>DELANARE</u>
was duly adopted on	<b>-•</b>
	organized,
Resolved, that KEATON, INC.  and existing in the State of DELAWARE, hereby add	
name PARR WEST AT SEA, INC.  Park West at Sea, Inc.  for use in Florida.	
Dated: DECEMBER 28, 1999  All Control of Market Augustine Color	
NHS19(3/95)	

Division of Corporations • P.O. Box 6327 • Tallahassee, Florida 32314

DEC 28 '99 15:32

TOTAL P.82 TOTAL PAGE. 02 \*\*

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1.	KEATON, INC.
words or abbre	KEATON, INC.  poration; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or eviations of like import in language as will clearly indicate that it is a corporation instead of a corporation or partnership if not so contained in the name at present.)
2.	DELAWARE 338-3413691 iry under the law of which it is incorporated) (FEI number, if applicable)
(State or countr	ry under the law of which it is incorporated) (FEI number, if applicable)
4	OCTOBER 27, 1995 5. PERPUTUAL
(Ďa	OCTOBER 27, 1995  5. PERPUTUAL ate of incorporation)  (Duration: Year corp. will cease to exist or "perpetual")
6. U1	pon qualification
(Date fire	rst transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7	1209 ORANGE STREET
· · · · · · · · · · · · · · · · · · ·	1207 ORANGE STREET
	WILMINGTON, DE 19801 (Current mailing address)
<b>Q</b>	CALLED OF ADD AND DECEMBER TO AND TO
(Purpose	SALES OF ART AND PICTURE FRAMING e(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and St	treet address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name:	CT CORPORATION SYSTEM
0.00' 1.11	-/- CT CODDODAUTON CYCODING
Office Address:	c/o CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD
	PLANTATION, , Florida, 33324
	(Zip code)
10 75 1 ( )	
10. Registered	agent's acceptance:
this application, l with the provision	med as registered agent and to accept service of process for the above stated corporation at the place designated in I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply ns of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept f my position as registered agent.  MALC (Registered agent's signature)  A. OILLIS, ASST SECY
	The state of the s
	(Registered agent's signature)
	MARC (Registered agent's signature)  A. SILLIS, ASST SECY a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the

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

which it is incorporated.

Chairman:	N/A	Service of the servic
	The state of the s	9000
<del></del>		28
Vice Chairman:	· · · · · · · · · · · · · · · · · · ·	2 22
	x/A	Ú,
Address:	N/A	
Sole Director:	ALBERT SCAGLIONE	4.03
	c/o PARK WEST GALLERIES, INC.	
	29469 NORTHWESTERN HIGHWAY, SOUTHFIELD, MT 48034	State of the state
Director:		
Address:		
· · · · · · · · · · · · · · · · · · ·	The Control of the Co	The Cartain Aff .
	S (Street address only - P.O. Box NOT acceptable)	
President:	ALBERT SCAGLIONE	
Address:	c/o PARK WEST GALLERIES, INC.	
	29469 NORTHWESTERN HIGHWAY, SOUTHFIELD, MT 48034	
Vice President:	MARK SCAGLIONE	······································
Address:	c/o PARK WEST GALLERIES, INC.	
	29469 NORTHWESTERN HIGHWAY, SOUTHFIELD, MI 48034	
Secretary:	NICOLETTE YANKE	
Address:	c/o PARK WEST GALLERIES, INC.	(m
. •	29469 NORTHWESTERN HIGHWAY, SOUTHFIELD, MI 48034	- 1, <u></u>
Treasurer:	NICOLETTE YANKE	• 
Address:	c/o PARK WEST GALLERIES, INC.	
	29469 NORTHWESTERN HIGHWAY, SOUTHFIELD, MI 48034	
NOTE: If nec	essary, for the attach an addendum to the application listing additional officers and/or director	rs.
13.	Tille Hell Hell Hell	
.,	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application	J
14	ALBERT SCAGLIONE, PRESIDENT AND DIRECTOR (Typed or printed name and capacity of person signing application)	8 PV 1

## 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 "KEATON, 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 SIXTEENTH DAY OF DECEMBER, A.D.

AND\_I\_DO HEREBY FURTHER CERTIFY THAT THE SAID "KEATON, INC."

WAS INCORPORATED ON THE TWENTY-SEVENTH DAY OF OCTOBER, A.D.

1995.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES
HAVE BEEN PAID TO DATE.

Edward J. Freel, Secretary of State

0145392

**AUTHENTICATION:** 

12-16-99

991542237

2556415 8300 ...

DATE