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(Requestor's Name)	
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MJH



TRANSMITTAL LETTER

	(Name of corporation - must include suffix)
Dear Sir or Madam:	
	on by Foreign Corporation for Authorization to Transact Business in Florid ", and check are submitted to register the above referenced foreign corpora- ida.
Please return all correspo	ondence concerning this matter to the following:
Bao Sh	eng WANG (Name of Person)
	(Name of Person)
PRORIT	SER, INC (Firm/Company)
g ween in a	(Firm/Company)
1620	Industry Dr Sw Ste C (Address)
Aubu	MY 98001
	(City/State and Zip code)
For further information c	CONCERNING this matter, please call: (ATENSEN at (253) 333 2061 (Area Code & Daytime Telephone Number)
For further information of Person (Name of Person STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St.	CATENSEN at (253) 333 2061 (Area Code & Daytime Telephone Number) MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327
For further information of Person (Name of Person STREET ADDRESS: Registration Section Division of Corporations	Concerning this matter, please call: (ATENSEN at (253) 333 2061 (Area Code & Daytime Telephone Number) MAILING ADDRESS: Registration Section Division of Corporations
For further information of Person (Name of Person STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St.	CATENSEN at (253) 333 2061 (Area Code & Daytime Telephone Number) MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 10, 2004

BAO SHENG WANG PRORIDER, INC. 1620 INDUSTRY DR. SW, STE C AUBURN, WA 98001

SUBJECT: PRORIDER, INC. Ref. Number: W04000017915

We have received your document for PRORIDER, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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) 245-6967.

Letter Number: 304A00032234

Michelle Hodges Document Specialist

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. PRORIDER, INC	;
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	•
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
2. WASHINGTON -3. = 91-1826022 (State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. 5 6 97 5. Oer petual (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	·
6. Upon qualification (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")	. · · · · · · · · · · · · · · · · · · ·
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	
1 1620 Industry Dr SW SteC	
7. 1620 Industry Dr Sw Ste C (Principal office address)	_
Auburn, WA 98001	
(Current mailing address)	
	L
8. Sell Safety equipment helmets & booster 5. (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	a a 1 s
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	
Name: NRAI Services, Inc.	
Office Address: 526 E. Park Avenue	S J
, $oldsymbol{\cdot}$	4
Tallahassee , Florida 32301	in the same
No. 10	
10. Registered agent's acceptance: Similar to accept service of process for the above stated corporation at the p	lace
designated in this application, I hereby accept the appointment as registered agent and agree to act in this capac	ity. I
further agree to comply with the provisions of all statutes relative to the proper and complete performance of my and I am familiar with and accept the obligations of my position as registered agent.	duties,
and a margarithm from accept the confunction of the position as registered agents	
N-1-1 1 hafter	
Carol Shelton - Asst. Secretary	

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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:

A. DIRECTORS		
Chairman: Bao Sheng Wang		
Address: 1620 Industry Dr Su	a Stec	
Auburn, WA 9:		
Vice Chairman:		
Address:		
Address:		
Directors		±2°
Director:	<u> </u>	
Address:		
Director:		**************************************
Address:	<u></u>	
	<u> </u>	a se train
B. OFFICERS	•	
President:	u Stec	
		<u> </u>
Auburn, WA	18001	<u> </u>
Vice President:	Burney Commencer	- tes -
Address:	- 1844 - W 1875 - 1875 - 1875 - 1875 - 1875 - 1875 - 1875 - 1875 - 1875 - 1875 - 1875 - 1875 - 1875 - 1875	<u></u>
Secretary:	ing sa	-
Address:		
Treasurer:		
Address:		
NOTE: If-nesessary, you may attach an addendum to the application	n listing additional officers and/or direc	etors.
triates Want		
13. (Signature of Director or Officer listed in number 12	of the application)	
ma.	PRESIDENT	
(Typed or printed name and capacity of person	on signing application)	



Secretary of State

I, Sam Reed, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION

OF

PRORIDER, INC.

I FURTHER CERTIFY that the records on file in this office show that the above named profit corporation was formed under the laws of the State of Washington and was issued a Certificate of Incorporation in Washington on May 6, 1997.

I FURTHER CERTIFY that as of the date of this certificate, no Articles of Dissolution have been filed, and that the corporation is duly authorized to transact business in the corporate form in the State of Washington.

Date: April 29, 2004

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Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Sam Reed, Secretary of State