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TRANSMITTAL LETTER

| TO: Registration Section Division of Corporations |
|--|
| SUBJECT: HWWKENTERPTISE (NL (Name of corporation - must include suffix) |
| (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: |
| Houssam Hachem (Name of Person) |
| (Name of Person) |
| HWI-Kenterprise. |
| HWUKENTERPTISE. (Firm/Company) |
| 3681 SW Coquina Cove Way #/部 = - |
| 3681 Sw Coquina Cove Way # 189 = - Palm City, F/ 34990 |
| (City/State and Zip code) |
| |
| For further information concerning this matter, please call: |
| Houssam ali Hachem at (317) 9956799 ony Time (Name of Person) (Area Code & Daytime Telephone Number) |
| STREET ADDRESS: Registration Section Division of Corporations Division of Corporations Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, FL 32399 Tallahassee, FL 32314 |
| Enclosed is a check for the following amount: |
| \$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\ |

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

| "Inc.," "Co.," "C | orporation; must include "IN orp," "Inc," "Co," or "Corp." |) | John Maria | old old from, | | |
|-------------------------|--|---|------------------------|-----------------------------------|-----------------|--------|
| (If name unavail: | able in Florida, enter alternat | e corporate name ad | opted for the purpo | se of transacting busin | ess in Florida) | |
| 2. Mile | higan | 3 | NA | | | |
| (State or country | under the law of which it is i | = | (FEI | number, if applicable) | | * |
| 1. Mar | ch 29, 200 | 4 _ 5. | NA | | | |
| (Date | of incorporation) | C | Duration: Year con | p. will cease to exist o | r "perpetual") | |
| ś | N/A. | | | | ·- <u>·</u> | ì |
| | (Date first tran | nsacted business in F 07.1501 & 607.1502 | lorida, if prior to re | gistration) negative liability | | |
| 6416 | | | | 48126 | 100 100 | |
| | Hartwell S | | | | | _ |
| 3681 3 | SW Coquin | a Cove | way a | 4/07-370 | atm city | F/39 |
| | (Cu | rrent mailing addres | is) | , and | 7 | |
| to enga | fron may be | tivity, wi | thinthe | purpose to | rwhich | act of |
| B. Curpura | fion may be | formed un | der the e | oushiss Cor | poratruk | AC F |
| (Purpo se (s | i) er corporation authorized ii | n nome state or coun | itry to be carried ou | t in state of Florida) | 00 | |
| 9. Name and stree | et address of Florida registe | ered agent: (P.O. I | Box <u>NOT</u> accepts | ible) | | |
| Name: | Houssam H | achem | | | | |
| Office Address: | 368/ Swing Pa/maity (City) | Cogvina | Cove W | ay # 107 | | |
| Office Address. | Dalma niti | / | <u>.=</u> • | 24 991 | | |
| | P CYTY (City) | <u> </u> | , Florida(Zi | 2 (0 de) | | |
| | (Cxty) | , | (21) | Coucy | | |

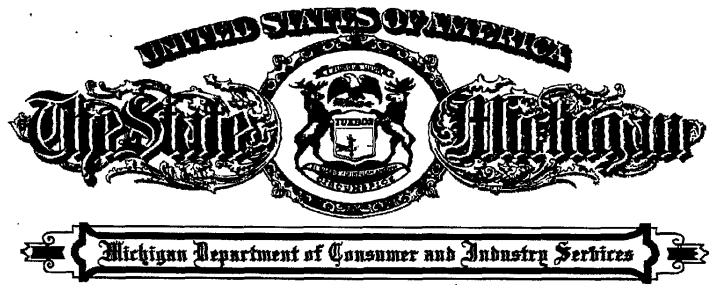
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(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.

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

| A. DIRECTORS | |
|---|-------------|
| Chairman: | · |
| Address: | ass |
| | - |
| Vice Chairman: | |
| Address: | |
| | |
| Director: | |
| Address: | <u></u> |
| | |
| Director: | <u></u> |
| Address: | |
| | |
| B. OFFICERS | |
| President: Houssan A. Hachem 5 7 17 Address: 6320 Caleman Dearborn, MI 48726. | |
| Address: 6320 Caleman Dearborn, MI 48/26. | |
| | |
| Vice President: | |
| Address: | |
| | |
| Secretary: | |
| Address: | • |
| Treasurer: | |
| Address: | ÷ |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. | |
| 12 HOUS SOM LETTOM | |
| (Signature of Director or Officer listed in number 12 of the application) | |
| 14. Houssam A. Hachem — (Typed or printed name and capacity of person signing application) | |



Lansing, Michigan

This is to Certify That

H.W.G.K. ENTERPRISE, INC.

was validly incorporated on March 30, 2004, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business; and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by Facsimile Transmission 813170

In testimony whereof, I have hereunto set my hand, In the City of Lansing, this 7th day of October, 2004.

Bureau of Commercial Services