# F05000007197

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Rue	iness Entity Nan	ne)
eud)	mess Littly Mail	10)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	
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11/02/05--01020--004 \*\*78,75



12/13/05

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### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: BASLAND, INC.	
(Name of corpora	ation - must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation as "Certificate of Existence," and check are submitted transact business in Florida.	for Authorization to Transact Business in Florida," to register the above referenced foreign corporation to
Please return all correspondence concerning this man	tter to the following: ( )
Basland, Inc. (Firm)	
(Firm/	Company)
6338 Rosecrest D	alle
(A	ddress)
6338 Rosecrest D  (A  Charlotte, NC 2	8210 WOS-50301
(City/Sta	te and Zip code)
For further information concerning this matter, please	se call:
Stave Hrncirik at (704	1 684 0044
	ea Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 8, 2005

STEVE HRNCIRIK BASLAND, INC. 6338 ROSECREST DRIVE CHARLOTTE, NC 28210

SUBJECT: BASLAND, INC. Ref. Number: W05000050306

We have received your document for BASLAND, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A brief description of the entity's nature of business must be included in the document.

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) 245-6958.

Lee Rivers Document Specialist

Letter Number: 705A0006674

### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	SLAND, INC.			
(Enter name of c "Inc.," "Co.," "C	orporation; must include "orp," "Inc," "Co," or "Corp	INCORPORATED," p.")	"COMPANY," "CORPORAT	TION,"
(If name unavail	able in Florida, enter alterr	nate corporate name ad	opted for the purpose of transa	acting business in Florida)
Nort	h Carolina	3.	56.1808603 (FEI number, if	
State or country	under the law of which it i	is incorporated)	(FEI number, if	applicable)
	2/8/93	5.	Perpetual Duration! Year corp. will cease	
(Date	of incorporation)	(	Duration! Year corp. will cease	se to exist or "perpetual")
Ucon	Licensure			
<b>}</b>	(Date first to	ransacted business in F 3 607.1501 & 607.1502	lorida, if prior to registration) 2, F.S., to determine penalty lia	ability)
4990	1 Smith Farm	Road Matt	Lews , NC 28104	
, ,	(	Principal office addres	ss)	. 0
<u> </u>	38 Rosecrust			Per a
Dry		Current mailing addres	ory to be carried out in state of	All Assets
				Florida)
Name and stree	t address of Florida regi	stered agent: (P.O. I	Box NOT acceptable)	ORIGE 39
Name:	Dawn R. Joh	uson		Ÿ
fice Address:	2110 N. Ocean	n Blud.		
	tort Lauderoal	ve.	, Florida 33305 (Zip code)	
	(6.1	·3 <i>)</i>	(Zip code)	
ving been nam ignated in this ther agree to co	application, I hereby ac	ecept the appointments of all statutes rela	nt as registered agent and a stive to the proper and com	nted corporation at the place gree to act in this capacity. plete performance of my dut
		$\wedge$		

- 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:

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



## NORTH CAROLINA Department of The Secretary of State

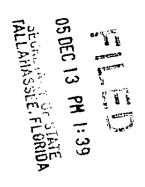
### **CERTIFICATE OF EXISTENCE**

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

### BASLAND, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 8th day of February, 1993, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 18th day of October, 2005

Elaine I Marshall

**Secretary of State**