TO: Quadication fax Lien Section Division of Corporations To: Quadication fax Lien Section Division of Corporations

SUBJECT:Easy Returns Worldwide, Inc.	
(Name of corporation - must include suffix)	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Florida", "Certificate of Existence", and check are submitted to register the above foreign corporation to transact business in Florida.	Business in referenced
Please return all correspondence concerning this matter to the following:	
Chris Earl	
(Name of Person)	-
Easy Returns Worldwide, Inc. (Firm/Company)	ALLANA
208 Chesterfield Industrial Boulevard (Address)	
Chesterfield, Missouri 63005	3: 12 3: 12 CORIDA
(City/State/Zip)	

COURIER ADDRESS:

Chris Earl

(Name of Person)

Should you need to call someone concerning this matter, please call:

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

729-3279

(Area Code & Daytime Telephone Number)

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:

t.	Easy Returns Midwest, Inc. (Name of corporation: must include the word "IN words or abbreviations of like import in language natural person or partnership if not so contained	NCORPORATI e as will clearly	D", "COMPANY","CO	RPORATION oration instea	V" or d of a	
	value person or partiership it not so contained	in the name at	present.)			
2.	Missouri	2	43-1464974			
	Missouri (State or country under the law of which it is inco	orporated)	(FEI number, if a	plicable)		_
					١.	
4.	November 18, 1987	5.	Perpetual (Duration: Year corp. wi "perpetual")	EE.	š	
	(Date of Incorporation)		(Duration: Year corp. wi	Il cease to ex	iş, şı	_11
			perpetuai")	2,7	5	-
,	unon guntification					(-7-1
O,	upon qualification (Date first transacted business in Florida, (SE	E SECTIONS 607	7 1501 607 1502 AND W	7 (55 (1) (C.)	₽2	
			.112011 001110051 VIAD 01	25 25 26 26 26 26 26 26 26 26 26 26 26 26 26	ယ္	
7.					죠_	
				3.0		
	208 Chesterfield Industrial	Boulevard,	Chesterfield, M	issouri 6	3005	
	(Curre	ent mailing add	ress)			_
8	Easy Returns returns exspired (Purpose(s) of corporation authorized in home st	pharmaceut	ical to manufactu	rer for c	redi	<u>t</u>
9. 1	Name and street address of Florida reginacceptable)	istered agen	t: (P.O. Box or Mai	l Drop Box	<u>NO'</u>	<u>r</u>
	Name: CT Corporation S	ystem				
	Office Address: 1200 S. P	ine Island	Road #250			
	Plantation		mana 33	324		
		.	, Florida , <u>33</u>	(Zip Code)		
10.	Registered agent's acceptance:			(·-· p)		
regi all s	ing been named as registered agent an oration at the place designated in this stered agent and agree to act in this cape statutes relative to the proper and complaceept the obligations of my position as re	is application acity. I furth lete performa	on, I hereby accept her agree to comply ince of my duties, a	the ama		
	(Register			-		
- (Attached is a certificate of existence duly lelivery of this application to the Departm official having custody of corporate record	ent of State	by the Corretors of C	tote on other		

incorporated.

ACCEPTANCE OF APPOINTMENT

RE: EASY RETURNS MIDWEST, INC. (MO DOM)

Pursuant to Sections 48.091 and 607.0501, Florida Statutes, the undersigned acknowledges and accepts its appointment as registered agent of the above corporation and agrees to act in the capacity and to comply with the provisions of the Florida Business Corporation Act (1990) relative to keeping open the registered office at the address specified above. The undersigned is familiar with, and accepts the obligations of, Section 607.0505, Florida Statutes.

Dated: August 14, 1996

C T CORPORATION SYSTEM

Bonnie Harmon, Assistant Secretary

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable) A. DIRECTORS (Street address only- P. O . Box NOT acceptable) Chairman: N/A N/A____ Address: Vice Chairman: N/A Address: N/A Director: N/A N/A_____ Address: Director: N/A Address: N/A B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: David Mogi1 Address: _____ 208 Chesterfield Industrial Blvd Chesterfield, Missouri 63005 Vice President: ___Dick_Drury Address: 208 Chesterfield Industrial Boulevard Chesterfield, Missouri 63005 Secretary: N/A Address: ______N/A Treasurer: _____N/A Address: N/A NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. ___ Dick Drury

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

STATE OF MISSOURI



Rebecca McDowell Cook Secretary of State

CORPORATION DIVISION
CERTIFICATE OF CORPORATE GOOD STANDING

1, REBECCA McDOWELL COOK, SECRETARY OF STATE OF THE STATE OF MISSOURI, DO HEREBY CERTIFY THAT THE RECORDS IN MY OFFICE AND IN MY CARE AND CUSTODY REVEAL THAT

WAS INCORPORATED UNDER THE LAWS OF THIS STATE ON THE 18TH DAY OF NOVEMBER, 1987, AND IS IN GOOD STANDING, HAVING FULLY COMPLIED WITH ALL REQUIREMENTS OF THIS OFFICE.

IN TESTIMONY WHEREOF, I HAVE SET MY HAND AND IMPRINTED THE GREAT SEAL OF THE STATE OF MISSOURI, ON THIS, THE 14TH DAY OF AUGUST, 1996.

EASY RETURNS MIDWEST, INC.



