1000102

# State of Idaho

## Department of State

CERTIFICATE OF AUTHORITY
OF

ACTION CHARTER LINES, INC.

I, PETE T. CENARRUSA, Secretary of State of the State of Idaho, hereby certify that duplicate originals of an Application of ACTION CHARTER LINES, INC. for a Certificate of Authority to transact business in this State, duly signed and verified pursuant to the provisions of the Idaho Business Corporation Act, have been received in this office and are found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Authority to ACTION CHARTER LINES, INC. to transact business in this State under the name ACTION CHARTER LINES, INC. and attach hereto a duplicate original of the Application for such Certificate.

Dated: November 6, 1992



Pite of Enaveusa SECRETARY OF STATE

By Meryl Delries

### APPLICATION FOR CERTIFICATE OF SEC. OF STATE (Profit Corporation) To the Secretary of State of Idah Pursuant to Section 30-1-110, Idaho Code, the undersigned Corporation hereby applies for a Certificate of Authority to transact business in your State, and for that purpose submits the following statement: MION CHARTER LINE 1. The name of the corporation is The name which it shall use in idaho is Same (To be used only when required to avoid a conflict with a name already on file. Must be accompanied by a Board of Directors resolution adopting assumed name in Idaho.) 3. It is incorporated under the laws of 4. The date of its incorporation is $\bot$ \_\_\_\_\_ and the period of its duration is The address of its principal office in the state or country under the laws of which it is incorporated is 6. The address to which correspondence should be addressed, if different from that in item 5. 7. The street address of its proposed registered office in Idaho is \_ , and the name of its proposed registered agent in idaho at that address is 8. The purpose or purposes which it is proposed to pursue in the transaction of business in Idaho are: motor Corner rest. 4 (Continued on reverse) Secretary of State use only IDANO SECRETARY OF Submit application and certificate of status to: CK 🛊 2111 Office of the Secretary of State **Division of Corporations** Statehouse, Room 203 Boise, Idaho 83720

| Name  | Office   | Address 0 1 CO2 11 99   |
|---|--|---|
| by Luttrull   | tres.  | (6) 10213 Balmer Rd SAO WA 99004<br>W 15/21 Loobs Rd SPO WA 99204   |
| eci Hamilton  | Ser / Treas  | 6) 15/21 a banks Rd 5PO LXX 99204   |
|   |  | _ <del>073722 4602374                                    </del>   |
|   |  |   |
| `   |  |   |
|   |  |   |
|   |  |   |
|   |  | <u> </u>  |
|   |  |   |
|   |  |   |
|   |  |   |
|   |  | A   |
|   |  | · · · · · · · · · · · · · · · · · · ·   |
| The corporation accepts idaho. $\forall \triangle \varsigma$                              | s and shall comply wit                                   | h the provisions of the Constitution and the laws of the State of   |
|   | Ву   | Run m Zullreul  |
| TE OF WA  | and<br>\   | In Provident Ofice President (pieces specify)  Its Secretary/Assistant Secretary (pieces specify)   |
| 0 . 4   | ) ss:  | The President (please specify)  It is Secretary/Assistant Secretary (please specify)  |
|   | social second  | The President (please specify)  It is Secretary/Assistant Secretary (please specify)  |
| UNTY OF SPOKA   | S. Louce   | he Secretary/Assistant Secretary (please specify)  As Secretary/Assistant Secretary (please specify)  As notary public, do hereby certify that on  19 92 , personally appeared before   |
| UNTY OF SPOKA   | S. Louce   | he Secretary/Assistant Secretary (please specify)  As Secretary/Assistant Secretary (please specify)  , a notary public, do hereby certify that on  , 19 92 , personally appeared before  |
| unty of Spoka<br>1, Jennefer<br>19<br>Boy M Sut   | S. Louce<br>you Oct.<br>trulla Guna                      | he Secretary/Assistant Secretary (please specify)  As Secretary/Assistant Secretary (please specify)  As a notary public, do hereby certify that on   |
| unty of Spoka<br>1, Jennefer<br>19<br>Boy M Sut   | S. Louce<br>you Oct.<br>trulla Guna                      | he Secretary/Assistant Secretary (please specify)  As Secretary/Assistant Secretary (please specify)  As a notary public, do hereby certify that on   |
| UNTY OF Spoka<br>1, Jennefer<br>19<br>Ray M. Luts<br>President & S                        | S. Louce<br>by of Oct.<br>trulla Gene<br>Sirratory of C  | he Secretary Assistant Secretary (please specify)  As Secretary Assistant Secretary (please specify)  As a notary public, do hereby certify that on   |
| unty of Spoka  I, Junifer  19  de  Roy M Xut  The Prisident & S  (s)he signed the foregon | S. Souce<br>by of Oct.<br>trulla Gene<br>Surrentary of C | he Secretary Assistant Secretary (please specify)  As Secretary Assistant Secretary (please specify) |
| unty of Spoka  I, Junifer  19  de  Roy M Xut  e Prisident & S  (s)he signed the foregoing | S. Souce<br>by of Oct.<br>trulla Gene<br>Surrentary of C | he Secretary Assistant Secretary (please specify)  As Secretary Assistant Secretary (please specify) |
| unty of Spoka  I, Junifer  19  de  Ray M Xut  ne President & S  (s)he signed the foregon  | S. Souce<br>by of Oct.<br>trulla Gene<br>Surrentary of C | he Secretary Assistant Secretary (please specify)  As Secretary Assistant Secretary (please specify)  As a notary public, do hereby certify that on   |
| unty of Spoka  I, Junifer  19  de  Ray M Xut  ne President & S  (s)he signed the foregon  | S. Souce<br>by of Oct.<br>trulla Gene<br>Surrentary of C | he Secretary Assistant Secretary (please specify)  As Secretary Assistant Secretary (please specify) |
| UNTY OF Spoka  1, Jennyfer  19 de  Roy M Sut  | S. Souce<br>by of Oct.<br>trulla Gene<br>Surrentary of C | he Secretary Assistant Secretary (please specify)  As Secretary Assistant Secretary (please specify) |
| 1, Gennefer   | S. Souce<br>by of Oct.<br>trulla Gene<br>Surrentary of C | he Secretary Assistant Secretary (please specify)  As Secretary Assistant Secretary (please specify)  As a notary public, do hereby certify that on   |
| unty of Spoka  I, Junifer  19  de  Ray M Xut  ne President & S  (s)he signed the foregon  | S. Souce<br>by of Oct.<br>trulla Gene<br>Surrentary of C | he Secretary Assistant Secretary (please specify)  As Secretary Assistant Secretary (please specify)  As a notary public, do hereby certify that on   |

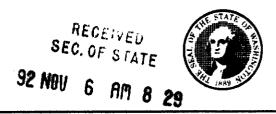
The state of the s

C to a second

 $J_{p} = 1$ 

1.4(\* 5)

AGA785 Profit



#### STATE of WASHINGTON SECRETARY of STATE

#### CERTIFICATE OF EXISTENCE/AUTHORIZATION

OF

ACTION CHARTER LINES, INC.

I, RALPH MUNRO, Secretary of State of the State of Washington, hereby certify that I am the custodian of the corporation records of this state.

I FURTHER CERTIFY that the records on file in this office show that the above - named profit corporation was incorporated under the laws of the State of a

Washington

and was issued a certificate of

incorporation

in Washington on

November 02, 1989.

I FURTHER CERTIFY that as of the date of this certificate no Articles of Dissolution or Certificate of Withdrawal have been filed, that the conditions of the Revised Code of Washington, Title 23B.01.280(2) (a) through (d) have been met, and the corporation is duly authorized to transact business in the corporate form in the State of Washington.

Date: November 02, 1992
Given under my hand and the seal of the State of Washington, at Olympia, the State Capitol.

Ralph Munro; Secretary of State

N. Brown