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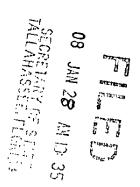
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PICK-UP WAIT MAIL								
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(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								

Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations							
SUBJECT: DeFense Investigators Group, Inc. (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:							
Donal P. Anderson							
(Name of Person)							
De Fense Investigators Group, Inc. (Firm/Company)							
Po Box 119							
$\frac{PO Bo \times 119}{\text{(Address)}}$							
HANSON, MA 02341							
(City/State and Zip code)							
For further information concerning this matter, please call:							
MARK D: Serio at (781) 293-4777							
(Name of Person) (Area Code & Daytime Telephone Number)							
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing 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 & S78.75 Filing Fee & Certificate of Status Certified Copy \$87.50 Filing Fee, Certificate of Status & Certified Copy Certified Copy							

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. <u>De Fe</u>	corporation; must include "IN	STIGATOR	s Gro	up, In	2.	
(Enter name of c	corporation; must include "IN Corp," "Inc," "Co," or "Corp.'	NCORPORATED," ')	"COMPANY,"	"CORPORATIO	ON,"	
,, _	, s.p,, ee, e. ee.p.	,				
(If name unavail	lable in Florida, enter alterna	te corporate name ac	dopted for the p	urpose of transact	ing business in	Florida)
(State or country	MA under the law of which it is	incorporated)	<u> </u>	FEI number, if ap	plicable)	
4(Date	2/5/96 c of incorporation)	5. <u> </u>	(Duration: Year	r corp. will cease	to exist or "pert	etual")
	, ,	·				,
6	(Date first tra	nsacted business in I	Florida, if prior	to registration)		
	(SEE SECTIONS	507.1501 & 607.150	2, F.S., to deter	mine penalty liabi	-	
71060	Box 119 (C)	TRECT	HAN	SON, MA	0234/	
	(Pr	rincipal office addres	ss)			
Po	Box 119		HAN	SON. MA	02341	
	(C	urrent mailing addre	ss)			
$\overline{\mathcal{D}}$						
8	ivate IN s) of corporation authorized in	VESTIGAT	rians	J4 :4-4 6F	1'1.\	
(Furpose(s	s) of corporation authorized (in nome state or coul	ntry to be carrie	d out in state of r	iorida)	
9. Name and stree	<u>et address</u> of Florida regist	tered agent: (P.O.	Box NOT acc	eptable)	5	
Name:	NANCY	L. McCa	eccont.			8
	,					
Office Address:	<u>6499</u> Ye	DRA HULA	ve		(<u>0</u> - 1	N comm
	For t (City	Pierce_	, Florida _	3 <i>4951</i>		
	(City	·)		(Zip code)		
10. Registered a	gent's acceptance:					ت ال _{سيد} ية
	ed as registered agent an					
uesignatea in this further agree to c	application, I hereby accomply with the provisions	ept the appointme s of all statutes reli	nt as registere ative to the pro	ed agent and agr over and compl	ree to act in th ete nerforman	is capacity. ce of my dut
and I am familiar	with and accept the oblig	gations of my posit	tion as registe	red agent.	porjonam	0,,

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:	7.0 8 TO
Vice Chairman:	
Address:	
	26. 0
Director:	
Address:	· · · · · · · · · · · · · · · · · · ·
Director:	
Address:	
3. OFFICERS	
President: DONAL P. Anderson	
Address: 299 Plymoutin Street Pembroke, MA 02359	
Pembroke, MA 02359	
/ice President:	
Address:	
Secretary:	
Address:	
reasurer:	
Address:	
E: As A SMALL TIGHTLY held CORP DONALPAND	leason is the only officer + serves all corp
NOTE: If necessary, you may attach an addendum to the application	listing additional officers and/or directors.
3. Vonal Pal PRO	
(Signature of Director or Officer listed in number	\sim " $\stackrel{\cdot}{\iota}$
4. DONAL & An Lerson	PRESIDENT



The Gommonwealth of Massachusetts Secretary of the Gommonwealth

State House, Boston, Massachusetts 02133

January 9, 2008

TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office,

DEFENSE INVESTIGATORS GROUP, INC.

is a domestic corporation organized on February 5, 1996, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



ranino Galecin



In testimony of which, I have hereunto affixed the Great Seal of the Commonwealth on the date first above written.

Secretary of the Commonwealth

Processed By: njm