May 5, 2000

Registration Section Division of Corporations P.O. Box 6327 Tallahasee, FL 32314

800003243918--6 -05/09/00--01022-003 \*\*\*\*\*\*87,50 \*\*\*\*\*\*87,50

Dear Sir:

W-12676

Please find attached a completed application to register Consolidated Financial Services Corp., a Nevada corporation to transact business in Florida.

In accordance with the application instructions, the following documents are included with this application:

- 1) Completed transmittal letter:
- 2) Completed Application by Foreign Corporation for Authorization to Transact Business in Florida:
- 3) Original Certificate by Dean Heller, Secretary Of State of the State of Nevada dated February 29<sup>th</sup>, 2000 duly authenticating the existence of Consolidated Financial Services Corp.

4) a check in the amount of \$87.50 to pay for the filing fee, Certificate of Status and Certified Copy.

Thank you for processing this application.

Strnderely,

Gilles Stucker .

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ARY OF STATE

4nth 5/25

### TRANSMITTAL LETTER

To:	Registration Se Division of Co								
SUBJ	ECT: <u>CONS</u>	LIDATED	FINANC	AL	SERVICES	CORP			
	•	(Na	me of corporati	ion - m	ıst include suffix	·)			
Dear S	Sir or Madam:								
"Certi	nclosed "Applicate of Existence of the business in Flo	e", and check a	Corporation for re submitted to	r Autho registe	rization to Trans r the above refere	act Busines enced foreig	s in Flor n corpo	rida", ration	to
Please	return all corresp	pondence concer	ning this matte	er to the	following:				
		Giller	STUCKER	•			_		
		7.1-1-1	STUCKER (Name o	of Perso	n)		-		
	CON	SOLIDATE	FINANC	IAL	SERVICES	CORP.	-		
			(Firm/C	ompan	7)				
		1670 MIC	CANOPY				SEC	00	
			(Ad	dress)				MAY	
		MIAMI.	FL. 331 (City/S	<u> 33                                   </u>				/ 25	
			(City/S	tate/Zip	)				
Shoule	d you need to cal	l someone conce	erning this mat	ter, plea	se call:		FLORIDA	M 8: 38	D
(-	Filler Stur	ker	at ( 305	`\	586-733	5.			
	(Name of Pers	son)	(Are	a Code	& Daytime Tele	phone Num	ber)	-	
STRE	ET ADDRESS:			MA	ILING ADDRE	SS:			
Divisi 409 E.	ration Section on of Corporation Gaines St. assee, FL 32399			Divi P.O.	stration Section sion of Corporati Box 6327 ahassee, FL 323				
Enclos	sed is a check for	the following a	mount:			/			
□ \$70	0.00 Filing Fee	☐ \$78.75 Fill Certificate	ing Fee & (e of Status		75 Filing Fee & ified Copy		50 Filing	of Stat	



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 16, 2000

GILLES STUCKER 1670 MICANOPY AVE. MIAMI, FL 33133

SUBJECT: CONSOLIDATED FINANCIAL SERVICES CORP Ref. Number: W00000012676

We have received your document for CONSOLIDATED FINANCIAL SERVICES CORP and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION DOCUMENT SPECIALIST indicated.

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) 487-6097.

Michael Mays Document Specialist

Letter Number: 400A00027354

# RESOLUTION OF BOARD OF DIRECTORS (Please print or type)

I, the undersigned <u>Stucker</u> , do hereby certify (Name)	
that this Resolution of the Board of Directors of CONSOLIDATED.	<del></del>
FINANCIAL SERVICES CORP. (Corporate Name)	_
a corporation duly organized and existing under the laws of the State of NEVADA,	t
was duly adopted on MAY 22nd ,20 00.	Ē
Be it resolved, that CONSOLIDATED FINANCIAL SERVICES CORP. (Corporate Name)	,
organized and existing in the State of <u>NEVADA</u> , hereby adopts the name	
SOLIDATED FINANCIAL SERVICES CORP. SALES for use In Florida.	
Dated: 5/22/00 FIGURE 38	
Signature of either Chairman, Vice Chairman or any officer	
Type or print Name	

INHS19(1/00)

### 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.

(Name of corp	OLIDATED FINA oration; must include the word	I "INCORPORAT	"FD" "COMPA	NIV" "CORRORATIO	ON" or
words or apple	eviations of like import in lang or partnership if not so contain	uage as will clear	ly indicate that i	it is a corporation inste	ead of a
2. NE	EVADA y under the law of which it is i		386	- 0846762	
(State of Country	y under the law of which it is i	ncorporated)		(FEI number, if appl	licable)
42	129 00 te of incorporation)	5	PERPE	TUAL.	-
(24	te of meorporation)	(Di	ration: Year co	rp. will cease to exist	or "perpetual")
(Date first transa	UPON QUAL acted business in Florida. If co (SEE SECT	CIFICATION Proporation has not FIONS 607.1501,	transacted busi 607.1502 and 8	ness in Florida, insert 17.155, F.S.)	"upon qualification.")
7. a. <u>5300</u> W	I. SAHARA AVENUE (Prix	SUITE 10	6 LAS V	EGAS, NEVADA	A . 89146
b. <u>5300 W</u>	SAHARA AVENUE	SUITE 10	6, LAS 1	IEGAS, NEVAD	A. 29146.
	(Curi	rent mailing addr	ess)		SE(
8 1117=6	SVIET E CANVER				
(Purpose(	RNET E-COMMER s) of corporation authorized in	home state or co	untry to be carri	ed out in state of FL	
	eet address of Florida regis				
		tered agent. (1	.O. DOX OF IME	m Drop Box NOT a	acceptable) ≧ □
Name: _	Giller Stucker	<u> </u>			38 38 ATE
Office Address: _	1670 Micanopy	Ave			<b>≫                                    </b>
•	Miami, FL.			33133	
				(Zip code)	-
0. Registered ag	ent's acceptance:				
laving been named or this application, l comply with the prov	as registered agent and to acc hereby accept the appointme visions of all statutes relative ations of my position as regis	in as registered a to the proper and ered agent.	gent and agree complete perfo		
	(Regist	eled agent's sign	ature)		

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.

irman: DAVID BRUCE	
Iress: 5300 W, SAHARA	
STE. 106 LAS VEGAS NEVADA.	89146
e Chairman:	
lress:	
ector:	
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•	
OFFICERS	
sident: DAVID BRUCE.	
tress: <u>5300 W. SAHARA</u>	1
SUITE 106 LAS VEGAS NEVADA. 89	146 = 58 8
e President:	LAND TO THE CONTRACT OF THE CO
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(Typed or printed name and capacity of person signing application)



#### **CORPORATE CHARTER**

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that **CONSOLIDATED FINANCIAL SERVICES CORP**. did on **FEBRUARY 29**, **2000**, file in this office the original Articles of Incorporation; that said Articles are now on file and of record in the office of the Secretary of State of the State of Nevada, and further, that said Articles contain all the provisions required by the law of said State of Nevada.

IN WITNESS WHEREOF, I have hereunto set my band and affixed the Great Seal of State, at my office in Las Yegas, Nevada, on FEBRUARY 29, 2000.



Secretary of State

Certification Clerk