## F-01000002939

(Name of corporation - must include suffix)

## TRANSMITTAL LETTER

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:

Dear Sir or Madam:

to transact business in Florida.

Registration Section Division of Corporations

SUBJECT: WORLDWIDE

Please return all correspondence concerning this matter to the follow-

C BASSO (Name of Person) ANSFERS (Firm/Company) For further information concerning this matter, please call: BASSO at (812) 584-0060

(Area Code & Daytime Telephone Number) (Name of Person) STREET ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations 409 E. Gaines St. P.O. Box 6327 Tallahassee, FL 32399 Tallahassee, FL 32314 Enclosed is a check for the following amount: □ \$70.00 Filing Fee □ \$78.75 Filing Fee & \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certificate of Status & 6/4 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. WURLDWIDE TRANSFERS CORPORATION (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or
words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. <u>NEVAOA</u> (State or country under the law of which it is incorporated)  3. <u>59-37/5276</u> (FEI number, if applicable)
(FEI number, if applicable)
4. 26-01 (Date of incorporation)  5. Or person (Duration: Year corp. will cease to exist or "perpetual")
6. $2 - 10 - 01$
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 5841 PORTS MOUTH DR - TAMPA, FL 33615  (Principal office address)  S841 PORTS MOUTH DR - TAMPA, FL 33615  (Current mailing address)
5841 PORTSMOUTH DR - TAMOR FL 22/15
(Current mailing address)
8. TRANSPORTATION BROKER  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: ANGELA BASSO  Office Address: 5841 PORTSMOUTH DR
TAMPA, Florida 336/5 (City) (Zip code)
10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.
Angela Sasso
(Registered agent's signature)

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: ANGELA BASSO
Address: 5841 PORTS MOUTH OR
TAMPA FL 33615
Vice Chairman: MARGARET GRAY
Address: 5841 PORTSMOUTH DR
TAMPA FL 33615
Director: ANGELA BASSO
Address: 5841 PORTSMOUTH DR
TAMPA FL 33615
Director: MARGABET GRAY
Address: 5841 PORTS MOUTH DR
TAMPA FL 33615
B. OFFICERS
President: ANGELA BASSO
Address: 5841 PORTS MOUTH DR
TAMPA FL 33615
Vice President: MARGARET GRAY
Address: 5841 PORTS MOUT H DA
TAMPA FL 33615
Secretary: ANGELA BASSO
Address: 5841 PORTS MOUTH DR TAMPA FL 33615
Treasurer: MARGARET GRAY
Address: 5841 PORTSMOUTH DR TAMPA FL 33615
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. Jugeld Sasse
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. ANGELA ISASSO PRESTIDEN (Typed or printed name and capacity of person signing application)



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **WORLDWIDE TRANSFERS**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since February 26, 2001, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on May 21, 2001.

Secretary of State

Ву

Certification Clerk