

FD10000004243

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Asset Protection Strategies, 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:

Mike Boaz

(Name of Person)

Asset Protection Strategies, Inc

(Firm/Company)

2858 NW 4th Ln

(Address)

Gainesville FL 32607-2508

(City/State and Zip code)

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*****78.75 *****78.75

For further information concerning this matter, please call:

Mike Boaz

(Name of Person)

at (352) 379-9903

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

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

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
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. Asset Protection Strategies Inc.
(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. Nevada 3. 88-0502156
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 17 July 2001 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. "upon qualification"
(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. 2858 NW 4th Ln Gainesville FL 32607-2508
(Principal office address)
2858 NW 4th Ln Gainesville FL 32607-2508
(Current mailing address)
8. Asset Protection
(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: "Mike" Boaz Michael O. Boaz
Office Address: 2858 NW 4th Ln
Gainesville, FL, Florida 32607-2508
(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.

Michael O. Boaz

(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.

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TALLAHASSEE FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Mike Boaz

Address: 2858 NW 4th Ln
Gainesville, FL 32607-2508

Vice Chairman: Steve Wright

Address: 2858 NW 4th Ln
Gainesville, FL 32607-2508

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: William S. Reed

Address: 4601 W Sahara Ave Ste L
Las Vegas, NV 89102

Vice President: Mike Boaz / Steve Wright

Address: 2858 NW 4th Ln
Gainesville, FL 32607-2508

Secretary: William S. Reed

Address: 4601 W Sahara Ave Ste L Las Vegas NV 89102

Treasurer: William S. Reed

Address: 4601 W Sahara Ave Ste L Las Vegas NV 89102

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Michael O. Boaz x Stephen K. Wright
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Michael O. Boaz Stephen K. Wright
(Typed or printed name and capacity of person signing application)
Vice President Vice President

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TALLAHASSEE FLORIDA

SECRETARY OF STATE



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, **ASSET PROTECTION STRATEGIES, INC.**, 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 July 17, 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 July 30, 2001.



Dean Heller

Secretary of State

By

Laqueline Wray
Certification Clerk

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA