F0200001418forward

TRANSMITTAL LETTER

no MAR 20 AH 8: 52

			02 MAR 20 AU	0.00
TO: Registration Se Division of Co			-	
	k			
SUBJECT:	FEI.BER MOTIVATION,			
	(Name of co	rporation - must include su	ffix)	
Dear Sir or Madam:				
	ce", and check are submi		ransact Business in Florida", eferenced foreign corporation	<u>.</u>
Please return all corres	spondence concerning thi	s matter to the following:	800004914 -02/13/020	9380 1051-003
	G. CHARLES BROCK			_*****70.00
	()	lame of Person)		
]	EXECUTIVE PLANNERS	NORTHWEST	WO.	2-4636
1.791		irm/Company)		
	P O BOX 141124			_
		(Address)		_ , .
	SPOKANE, WA 99214			
** Angel		//State and Zip code)		_
,	(,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•
For further information	a concerning this matter,	please call:		
CHUCK_BROCK	at (509) 924-0955		
(Name of Pers		(Area Code & Daytime To	elephone Number)	-
`		•	· ·	
STREET ADDRESS: Registration Section Division of Corporatio 409 E. Gaines St. Tallahassee, FL 32399	$_{\rm ns}$	MAILING ADD Registration Sect Division of Corpo P.O. Box 6327 Tallahassee, FL	ion orations	
Enclosed is a check for	r the following amount:			
	□ \$78.75 Filing Fee & Certificate of State		& \$87.50 Filing Fee, Certificate of Statu Certified Copy	s &

F02-1418



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 18, 2002

G. CHARLES BROCK PO BOX 141124 SPOKANE, WA 99214

SUBJECT: FELBER MOTIVATION, INC.

Ref. Number: W02000004636

We have received your document for FELBER MOTIVATION, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6097.

Michael Mays Document Specialist

Letter Number: 402A00009863

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.

	OTIVATION, INC.
words or abbre	ration; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or viations of like import in language as will clearly indicate that it is a corporation instead of a or partnership if not so contained in the name at present.)
2 COLORADO (State or country	y under the law of which it is incorporated) 3. <u>84–1251852</u> (FEI number, if applicable)
4. <u>DECEMBER</u> (Dat	21, 1993 e of incorporation) 5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUAI	LIFICATION
(Date first transa	icted 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. <u>3331 SE 2</u>	22ND PLACE, CAPE CORAL, FL 33904
	(Principal office address)
1950 OAK	HILLS DRIVE, COLORADO SPRINGS, CO 80919
	(Current mailing address)
8. <u>portics</u> i	DELETING AND MANAGEMENT CENTERS
	S) of corporation authorized in home state or country to be carried out in state of Florida)
(Purpose	
(Purpose	(s) of corporation authorized in home state or country to be carried out in state of Florida)
(Purposed) 9. Name and <u>sta</u> Name:	s) of corporation authorized in home state or country to be carried out in state of Florida) reet address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
(Purposed) 9. Name and <u>sta</u> Name:	s) of corporation authorized in home state or country to be carried out in state of Florida) reet address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) THOMAS L. FELBER 3331 SE 22ND PLACE CAPE CORAL , Florida 33904
(Purposed) 9. Name and <u>sta</u> Name:	s) of corporation authorized in home state or country to be carried out in state of Florida) reet address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) THOMAS L. FELBER 3331 SE 22ND PLACE
Purposed Name and sta Name: Office Address: Office Address: Office Address:	s) of corporation authorized in home state or country to be carried out in state of Florida) reet address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) THOMAS L. FELBER 3331 SE 22ND PLACE CAPE GORAL , Florida 33904

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: THOMAS L. FELBER 3331 SE 22ND PLACE Address: CAPE CORAL, FL 33904 Fhairman: LINDA FELBER Address: SAME AS ABOVE Director: _ Address: _ Director: Address: **B. OFFICERS** President: THOMAS L. FELBER Address: SAME AS ABOVE Vice President: LINDA FELBER Address: SAME AS ABOVE Secretary: LINDA FELBER Address: SAME AS ABOVE Treasurer: THOMAS L. FELBER Address: ___SAME_AS_ABOVE NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) THOMAS L. FELBER, PRESIDENT

(Typed or printed name and capacity of person signing application)



STATE OF COLORADO

DEPARTMENT OF STATE CERTIFICATE

I, DONETTA DAVIDSON, Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

FELBER MOTIVATION, INC. (Colorado CORPORATION) File # 19931140823

was filed in this office on December 21, 1993 and has complied with the applicable provisions of the laws of the State of Colorado and on this date is in good standing and authorized and competent to transact business or to conduct its affairs within this state.

Dated: January 25, 2002

02 KMR 20

For Validation:

Certificate ID: 532359

To validate this certificate, visit the following web site, enter this certificate ID, then follow the instructions displayed.

www.sos.state.co.us/ValidateCertificate

SECRETARY OF STATE