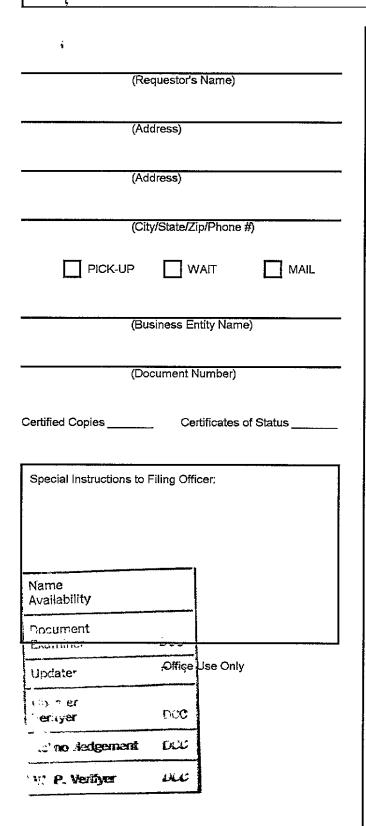
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O3 OCT -3 AM 8: OC SECRETARY OF STATE

## TRANSMITTAL LETTER

| TO: Registration Section Division of Corporations  |                           |              |   |
|--|---------------------------|--------------|---|
| SUBJECT:EXTRAORDINARY COACHING, INC.   |                           |              |   |
| (Name of corporation - must include suffix)  |                           |              | • |
| Dear Sir or Madam:   |                           |              |   |
| The enclosed "Application by Foreign Corporation for Authorization to Transact Business in "Certificate of Existence", and check are submitted to register the above referenced foreign to transact business in Florida.   | n Florid<br>corpora       | la",<br>tion |   |
| Please return all correspondence concerning this matter to the following:  |                           |              |   |
| RACHEL WEBER   | 됐습                        | 0            |   |
| (Name of Person)   | Eg                        |              | • |
| KLESHINSKI, MORRISON & MORRIS, LLP   |                           |              | 7 |
| (Firm/Company)   | <u> </u>                  | ယ်           |   |
| 590 LEXINGTON AVENUE   | 다.<br>다.                  | A            | Ē |
| (Address)  | 081                       | 30.8         |   |
| MANSFIELD, OHIO 44907  | Sw                        | 3            |   |
| (City/State and Zip code)  |                           |              | • |
| For further information concerning this matter, please call:   |                           |              |   |
| RACHEL WEBER at ( 419 ) 756-3211   |                           |              |   |
| (Name of Person) (Area Code & Daytime Telephone Number   | )                         |              |   |
| STREET ADDRESS:  Registration Section  Division of Corporations  409 E. Gaines St.  Tallahassee, FL 32399  Enclosed is a check for the following amount:  MAILING ADDRESS:  Registration Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314 |                           |              |   |
| ☑ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$87.50 Certificate of Status Certified Copy Certificate  | Filing Ficate of the Copy | Status       | & |

#### 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.

|      | natural person o   | r partnership if not so contained in the nam                      | -         | oresent.)<br>31-1721911  |              |                |   |
|------|--------------------|---|-----------|--|--------------|----------------|---|
| 2.   |                    | under the law of which it is incorporated)                        | _ 3.      | (FEI number, if applicable   |              |                | - |
|      | •                  | • •   |           | •  | =)           |                |   |
| +, J |                    |   | PERPETUAL |  | 100\         | -              |   |
|      | •                  | e of incorporation)   |           | (Duration: Year corp. will cease to exist                                | or "perpet   | ua!")          |   |
| 6.   |                    |   |           |  | <u>-</u>     |                | - |
|      | (Date first transa | octed business in Florida. If corporation has (SEE SECTIONS 607.) |           | transacted business in Florida, insert "upo, 607.1502 and 817.155, F.S.) | on qualifica | t <b>@</b> .") |   |
| 7    | 10730 EL           | PASO DRIVE RIVERVIEW, FL  |           |  |              | 130            | 1 |
| , .  | PO BOX 2           | 322 (Principal office   |           | •  | 1000         | ယ်             |   |
|      | 18700 E            | <b>WANSOLDRIME</b> RIVERVIEW, FL                                  | 33.       | 33568-2322   | <u> </u>     |                |   |
|      |                    | (Current mailing  | addı      | ress)  | ST)          | - <del></del>  |   |
|      | OONOULT            | TALO OFFICIONO  |           |  | REA          | 00             |   |
| 8.   |                    | ING SERVICES  |           |  |              | <u> </u>       | _ |
|      | (Purpose)          | (s) of corporation authorized in home state of                    | or co     | untry to be carried out in state of Florida)                             |              |                |   |
| 9.   | Name and str       | <u>reet address</u> of Florida registered age                     | nt:       | (P.O. Box or Mail Drop Box NOT ac  | ceptable)    |                |   |
|      | Name:              | JUDITH LOWRY  |           |  |              |                |   |
| _    |                    | 10730 EL PASO DRIVE   |           | <del></del> ,  |              |                |   |
| O    | ffice Address:     | TOTOG ELT AGO DITIVE  |           |  |              |                |   |
| _    |                    | RIVERVIEW   |           | , Florida  |              |                |   |
| Ĭ    |                    | (City)  |           | (Zip code)   |              |                |   |

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.

(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:   |                   |
| Address:  |                   |
|   |                   |
| Vice Chairman:  |                   |
| Address:  |                   |
|   |                   |
| Director:   |                   |
| Address:  |                   |
|   |                   |
| Director:   |                   |
| Address:  | 3 C               |
|   | 5 5 T             |
| B. OFFICERS   | EEE S IT          |
| President:JUDITH LOWRY  | T-0.55 € D        |
| Address: 10730 EL PASO DRIVE  | )8 8 00<br>DA     |
| RIVERVIEW, FLORIDA 33569  | •                 |
| Vice President: Stephen C. Lowry  |                   |
| Address: 10730 El Paso Drive  |                   |
| Riverview, FL 33569   |                   |
| Secretary: Judith Lowry   |                   |
| Address: Same   |                   |
| Treasurer: Stephent. Lowry  |                   |
| Address: Same   |                   |
|   |                   |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers a | and/or directors. |
| 13. Judith N. Jowly   |                   |
| (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the                | e application)    |
| 14. JUDITH LOWRY, PRESIDENT   | <u></u>           |
| (Typed or printed name and capacity of person signing application)                              |                   |

# UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show EXTRAORDINARY COACHING, INC., an Ohio Corporation, Charter No. 1159082, having its principal location in Powell, County of Delaware, was incorporated on May 31, 2000, and is currently in GOOD STANDING upon the records of this office.

03 OCT -3 AM 8: 00 SECRETARY OF STATE



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 17th day of September, A.D. 2003.

Ohio Secretary of State

Validation Number: 200325903024