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DIVISION OF CORPORATIONS
04 JAN 26 AM 7:59

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EURO FINANCIAL FIDELITY
(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:

DEBRA BARNES

(Name of Person)

(Firm/Company)

6277 LANSLOWNE CIRCLE

(Address)

BOYNTON, FL 33437

(City/State and Zip code)

For further information concerning this matter, please call:

DEBRA BARNES

(Name of Person)

at (561) 731-4475

(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

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

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**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. **EURO FINANCIAL FIDELITY CORP**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **OREGON**

(State or country under the law of which it is incorporated)

3. **73-1635967**

(FEI number, if applicable)

4. **SEPT. 21 2001**

(Date of incorporation)

5. _____

(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. **6277 LANSLOWNE CIRCLE**

BOYNTON FL 33437

(Principal office address)

SAME

(Current mailing address)

8. **PLACE OF RESIDENCE -**

(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: **IVAN GOODKIN**

Office Address: **2180 SAPPHIRE CIRCLE**

WEST PALM BEACH

(City)

, Florida **33144**

(Zip code)

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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.



(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: _____

B. OFFICERS

President: **MARC GOODKIN**

Address: **6277 LANNSDOWNE CIRCLE**

BOYNTON, FL 33437

Vice President: _____

Address: _____

Secretary: **DEBRA BARNES**

Address: **6277 LANSLOWNE CIRCLE, BOYNTON FL 33437**

Treasurer: _____

Address: _____

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

13. 

(Signature of Director or Officer listed in number 12 of the application)

14. **DEBRA BARNES**

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

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CERTIFICATE

State of Oregon

OFFICE OF THE SECRETARY OF STATE
Corporation Division

I, BILL BRADBURY, Secretary of State of Oregon, and Custodian of the Seal
of said State, do hereby certify:

EURO FINANCIAL FIDELITY CORP

was

incorporated

under the Oregon

Business Corporation Act

on

September 21, 2001

and is active on the records of the Corporation Division as
of the date of this certificate.

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In Testimony Whereof, I have hereunto set
my hand and affixed hereto the Seal of the
State of Oregon.

BILL BRADBURY, Secretary of State



By Catherine K. Staples
Catherine K. Staples
January 20, 2004