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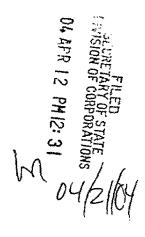
(Requestor's Name)	
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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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## TRANSMITTAL LETTER

TO: Registration Sec Division of Corp				
SUBJECT: <u>C/A</u>	(Name of corpora	Transl Tale, tion - must include suffix)		
Dear Sir or Madam:				
	e", and check are submitted t	or Authorization to Transact B o register the above referenced		
Please return all correspondent	ondence concerning this mat	ter to the following:		
HARVEY	Rowder (Name		<u>,</u>	
	,	of Person)		
Cibra INTERNATIONAL INC. (Firm/Company)				
	·- (Firm/	Company)		
1131 44	UKS NEST C	POURT	O4 VIS	
	(A	ddress)	PR SE	
PUNTA GORDA, FLORIDA 33950 NO				
	(City/Sta	te and Zip code)	P	
			JRA 12	
1/3/ HAWKS NEST COURT (Address)  PawTa Gorda, Flat: dA 33950 (City/State and Zip code)  For further information concerning this matter, please call:				
(Name of Perso	Rowdel at 94	<u>// ) <i>50 5 - 7660</i></u> ca Code & Daytime Telephone		
STREET ADDRESS: Registration Section Division of Corporation 409 E. Gaines St. Tallahassee, FL 32399	s	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for	he following amount:			
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	S87.50 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. CIBER TUTERNATIONAL TUC:
(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) (State or country under the law of which it is incorporated) Tuly 30, 1986

5. PERPETUAL
(Duration: Year corp. will cease to exist or "perpetual") (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.) 1/31 HAWKS NEST COURT PUNTA GORDA, FL. 33950 (Principal office address) 1/31\_ Hawks NEST CourT PONTA GORDA, FL. 3393
(Current mailing address) 8. SALES OF PROPERTY OR GOODS AT PETRY AND (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) Office Address: 1/31 Hauks NEST COURT Punta Grokata , Florida 33950 (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.

(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: Vice Chairman: \_\_ Address: Address: \_ Director: **B. OFFICERS** President: MANEY ROWSER Address: 1/31 Stawks NEST COURT PUNTA GOLDA, FLORICIA 33950 Vice President: \_ Address: Secretary: MARIE MICE CROUNCER Address: 1/3/ HAWKS NEST COURT PUNTA CORNA FL. 33950 Treasurer: BERTHA Edwards 1001 ChicAGO GALENA KANSAS 46739 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application)

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

### STATE OF KANSAS OFFICE OF SECRETARY OF STATE RON THORNBURGH

## To all to whom these presents shall come, Greetings:

I, RON THORNBURGH, Secretary of State of the state of Kansas, do hereby certify that, according to the records of this office,

CIBRA INTERNATIONAL, INC.

KANSAS FOR PROFIT CORPORATION

Business Entity ID Number: 0989145

was filed in this office on July 30, 1986 and has complied with the applicable provisions of the laws of the State of Kansas and on this date is in good standing and authorized to transact business or to conduct its affairs within this state.

Dated: 04/06/2004

#### For Validation:

Certificate ID: 14684

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

https://www.accesskansas.org/businessentity/validate.html



Signed:

RON THORNBURGH SECRETARY OF STATE