F04000003332

LARRY TRAVES
LARRY TRAVES (Requestor's Name) (Requestor's Name) (Address) (Address) (Address) (22244
(Address) TALLAHASSE, FL 32304
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Gusiness Lindy Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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SECRETARY OF STATE TALLAHASSEE, FLORE

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(302) 652

CORPCO-CORPORATIONS & COMPANIES, INC.

Incorporation Specialists
Foulk & Wilson Professional Centre
Suite 201

(800) 318-7407

910 Foulk Road Wilmington, Delaware 19803-3111 (302) 652-4800

March 21, 2003

Mr. Larry D. Travis 630 W. Virginia Street #329 Tallahassee, FL 32304

Via Facsimile (630-214-8208)
The First Class Mail

112011103 (310103 14131)

RE: EZ MONEY FOR YOU INC.

Dear Mr. Travis:

Thank you for your request for Certificate of Good Standing for the above referenced company. Enclosed please find this document, as provided by the State of Delaware.

Thank you for allowing us to be of service to you!

Singerely,

Alison Kochie Enclosures

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATU		
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSII	NESS IN THE STATE OF FLORIDATION	
1. EZ MONEY FOR YOU INC.	OLGANICA SCORPORA FROM B	
(Enter name of corporation; must include "INCORPORATED," "Co" "Inc.," "Co.," "Corp." "Inc," "Co," or "Corp.")	OMPANY," "CORPORATION,"	
, , , , , , , , , , , , , , , , , , , ,	FOF A	
EZ MONEY 4 U INC.	10 A	
(If name unavailable in Florida, enter alternate corporate name adopt	ted for the purpose of transacting business in Figrida)	
2. DELAWARE 3.	•	
(State or country under the law of which it is incorporated)	(FEI number, if applicable)	
4. 04/14/2004 JUNE 14, 2004 5.		
(Date of incorporation) (Du	ration: Year corp. will cease to exist or "perpetual")	
6. UDON QUALIFICATION		
(Date first transacted business in Florida. If corporation has not trans	sacted business in Florida, insert "upon qualification.")	
(SEE SECTIONS 607.1501, 607.	_	
7. 910 FOULK Rd, STE 201 Willing To (Principal office address)	IN DELAWARE 14808	
	ama 1/ 22241	
C30 W. Vieginia ST STE#329, TALLAHASSEE, FL 32304 (Current mailing address)		
	ţ	
8. WHOLESALE RETAIL, PRE-PAID SER	2VICES	
(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: LARRY TRAVK		
Office Address: <u>U30</u> , W. Vilginia ST #329		
TALLAHASSEE	, Florida <u>32304</u>	
(City)	(Zîp 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: William Johnson
Address: 1630 BALKIN Rd , TALLA HASSET, FL. 32305
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: LARY TRAVA
Address: 630. W. VIRGINIA ST #329
TALLAHASSEE, FL 32304
Kun Mayo
Vice President: SLAC VOUNG
Address: 1512 BAREBACK ST.
TALLAHASSEE, FL 32300
Secretary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. Narry Vraus
(Signature of Director or Officer listed in number 12 of the application)
14. LANGY TRAVIS / PRESIDENT
(Typed or printed name and capacity of person signing application)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EZ MONEY FOR YOU INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTEENTH DAY OF JUNE, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EZ MONEY FOR YOU INC." WAS INCORPORATED ON THE SECOND DAY OF JUNE, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

Warriet Smith Hindson Harriet Smith Windson

AUTHENTICATION: 3168902

DATE: 05-14-04

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