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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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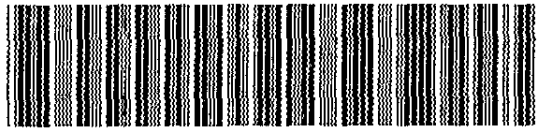
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CHOICE ONE WARRANTY INC.  
(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:

RONALD L. DAVIS, ESQ.  
(Name of Person)

RONALD L. DAVIS, P.A.  
(Firm/Company)

SUITE 200, KISLAK NATIONAL BANK BLDG., 1550 N.E. MIAMI GARDENS DRIVE  
(Address)

NORTH MIAMI BEACH, FLORIDA 33179  
(City/State and Zip code)

For further information concerning this matter, please call:

RONALD L. DAVIS, ESQ. at (305) 940-2352  
(Name of Person) (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

☐ \$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. CHOICE ONE WARRANTY INC.

(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. NEVADA

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

3. 38-3706135

(FBI number, if applicable)

4. AUGUST 10TH, 2004

(Date of incorporation)

5. PERPETUAL

(Duration Year corp. will cease to exist or "perpetual")

6. OCTOBER 1ST, 2004

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 5015 HIATUS ROAD

(Principal office address)

SUNRISE, FLORIDA 33351

(Current mailing address)

8. MARKETING AND SALES

(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 NOT acceptable)

Name: RONALD L. DAVIS, ESQ.  
SUITE 200-KISLAK NATIONAL BANK BLDG.

Office Address: 1550 N.W. MIAMI GARDENS DRIVE

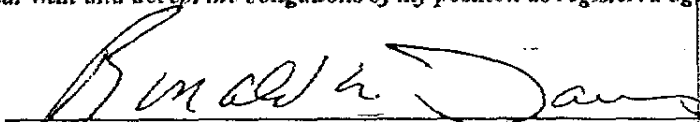
NORTH MIAMI BEACH, Florida 33179

(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:

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A. DIRECTORS

Chairman: G. C. STEWART

Address: 259 N.W. 97TH AVENUE  
PLANTATION, FLORIDA 33324

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS

President: G.C. STEWART

Address: 259 N.W. 97TH AVENUE  
PLANTATION, FLORIDA 33324

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: C. G. STEWART

Address: 259 N.W. 97TH AVENUE, PLANTATION, FLORIDA 33324

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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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. G. C. STEWART, PRESIDENT

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

# SECRETARY OF STATE



## CORPORATE CHARTER

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that **CHOICE ONE WARRANTY INC.**, did on **August 10, 2004** file in this office the original Articles of Incorporation; that said Articles are now on file and of record in the office of the Secretary of State of the State of Nevada, and further, that said Articles contain all the provisions required by the law of said State of Nevada.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on **August 10, 2004**.



*Dean Heller*

DEAN HELLER  
Secretary of State

By *Damienne C. Smel*

Certification Clerk

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