F04000006299

(Re	equestor's Name)	
(Ac	ldress)	
(A d	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
) }
		Į.

Office Use Only



500041843345

TOTAL CONTROL OF MITTING

2004 NOV -2 PH 2: 55

DIVINION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Nevada Corporate Center, Inc.

2248 Meridian Boulevard, Suite H Minden, Nevada 89423

775-782-2201 - Main 877-683-9343 - Main -Toll Free 775-284-7168 - Kristy Muck - Direct Line 877-297-5399 Ext. 168 - Kristy Muck - Direct Toll Free 775-824-0105 - Fax kmuck@sutlaw.com

November 1, 2004

OWNER ON SEE STATION

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Re: Invoice Investors Inc.

Dear Clerk:

Enclosed for filing you will find;

The Application by Foreign Corporation for Authorization to Transact Business in Florida for the above captioned company.

Also enclosed you will find a check in the amount of \$70.00 for the filing fee.

Please provide confirmation of filing at earliest opportunity. For your convenience enclosed is a Fed Ex Air Bill for return of the documents. Thank you for your attention to this matter.

If you do have any questions please do not hesitate to contact me directly at 877-297-5399 Ext. 168.

Thank you again.

Sincerely,

Kristy Muck

Account Representative

TRANSMITTAL LETTER

. .

TO: Registration Section Division of Corporations	
Division of Corporations	
SUBJECT: INVOICE INVESTORS INC.	0, 0,
(Name of corporation - must include	e surrix)
Dear Sir or Madam:	The state of the s
Division of Corporations SUBJECT: INVOICE INVESTORS INC. (Name of corporation - must include Dear Sir or Madam: The enclosed "Application by Foreign Corporation for Authorization to "Certificate of Existence," and check are submitted to register the above transact business in Florida. Please return all correspondence concerning this matter to the following the submitted to the subm	o Transact Business in Florida (1977) ve referenced foreign corporation (1977)
Please return all correspondence concerning this matter to the following	g: PF
KRISTY MUCK	
(Name of Person)	
NEVADA CORPORATE CENTER, INC.	
(Firm/Company)	
2248 MERIDIAN BOULEVARD, SUITE H	
(Address)	
MINDEN, NV 89423	
(City/State and Zip code)	
For further information concerning this matter, please call:	
KRISTY MUCK at (775) 284-7168	
(Name of Person) (Area Code & Daytim	e Telephone Number)
Registration SectionRegisDivision of CorporationsDivis409 E. Gaines St.P.O. J	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, FL 32314
Z \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Certificate of Status Certified Cop	•

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

INVOICE INVE	STORS INC.	TATUTES, THE FOLLOWING IS SUBMITTED TO BUSINESS IN THE STATE OF FLORIDA.
	orporation; must include "INCORPORATED, orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)
NEVADA	3.	
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)
SEPTEMBER:		PERPETUAL
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
. UPON FILING		
		n Florida, if prior to registration) 502, F.S., to determine penalty liability)
2248 MERIDIAN	N BOULEVARD, SUITE H, MINDEN, NV 8	• • •
. ZZ40 WEIGDIAI	(Principal office add	
2248 MERIDIAI	N BOULEVARD, SUITE H, MINDEN, NV 8	39423
CL 40 (VILL) (VI	(Current mailing add	
	(Curtin maning aud	ress)
	`	ress)
ADMINISTRAT	IVE SERVICES	
•	`	
(Purpose(s	IVE SERVICES	ountry to be carried out in state of Florida)
(Purpose(s	IVE SERVICES) of corporation authorized in home state or co	ountry to be carried out in state of Florida)
(Purpose(s Name and stree Name:	IVE SERVICES) of corporation authorized in home state or co	ountry to be carried out in state of Florida)
(Purpose(s Name and stree Name:	IVE SERVICES) of corporation authorized in home state or control address of Florida registered agent: (P.C. KAREN MALLER	ountry to be carried out in state of Florida) D. Box NOT acceptable)
(Purpose(s . Name and <u>stree</u> Name:	IVE SERVICES) of corporation authorized in home state or control address of Florida registered agent: (P.C. KAREN MALLER ONE PROGRESS PLAZA NO.1210	ountry to be carried out in state of Florida)
(Purpose(s . Name and <u>stree</u> Name: Office Address:	IVE SERVICES) of corporation authorized in home state or contract address of Florida registered agent: (P.C. KAREN MALLER ONE PROGRESS PLAZA NO.1210 ST. PETERSBURG (City)	Duntry to be carried out in state of Florida) D. Box NOT acceptable) , Florida 33701
(Purpose(s Name and stree Name: Office Address:	IVE SERVICES) of corporation authorized in home state or contact address of Florida registered agent: (P.C. KAREN MALLER ONE PROGRESS PLAZA NO.1210 ST. PETERSBURG (City) gent's acceptance:	ountry to be carried out in state of Florida) D. Box NOT acceptable) , Florida 33701 (Zip code)
(Purpose(s Name and stree Name: Office Address: O. Registered as laving been name lesignated in this	IVE SERVICES) of corporation authorized in home state or contact address of Florida registered agent: (P.C. KAREN MALLER ONE PROGRESS PLAZA NO.1210 ST. PETERSBURG (City) gent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointment.	ountry to be carried out in state of Florida) D. Box NOT acceptable) , Florida 33701 (Zip code) ice of process for the above stated corporation at the planent as registered agent and agree to act in this capacit
(Purpose(s). Name and stree Name: Office Address: O. Registered as faving been nam designated in this jurther agree to continue the signates of the signat	IVE SERVICES) of corporation authorized in home state or contact address of Florida registered agent: (P.C. KAREN MALLER ONE PROGRESS PLAZA NO.1210 ST. PETERSBURG (City) gent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointment of the provisions of all statutes resistered agent.	ountry to be carried out in state of Florida) D. Box NOT acceptable) , Florida 3370 \ (Zip code) ice of process for the above stated corporation at the planent as registered agent and agree to act in this capacity telative to the proper and complete performance of my desired.
(Purpose(s)). Name and stree Name: Office Address: 0. Registered as daving been nam designated in this further agree to continue the street of the street agree to continue the street agree the street agree the street agree to continue the street agree to continue the street agree the street agreet agr	IVE SERVICES) of corporation authorized in home state or contact address of Florida registered agent: (P.C. KAREN MALLER ONE PROGRESS PLAZA NO.1210 ST. PETERSBURG (City) gent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointment.	ountry to be carried out in state of Florida) D. Box NOT acceptable) , Florida 3370 \ (Zip code) ice of process for the above stated corporation at the planent as registered agent and agree to act in this capacity telative to the proper and complete performance of my desired.
(Purpose(s Name and stree Name: Office Address: O. Registered as faving been nam designated in this further agree to comment to the second street of the second street agree to comment to the second street to th	IVE SERVICES) of corporation authorized in home state or contact address of Florida registered agent: (P.C. KAREN MALLER ONE PROGRESS PLAZA NO.1210 ST. PETERSBURG (City) gent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointment of the provisions of all statutes resistered agent.	ountry to be carried out in state of Florida) D. Box NOT acceptable) , Florida 3370 \ (Zip code) ice of process for the above stated corporation at the planent as registered agent and agree to act in this capacity telative to the proper and complete performance of my desired.
(Purpose(s Purpose(s Name and stree Name: Office Address: O. Registered as faving been names festignated in this further agree to contact the second street of the second street agree to contact the second street th	IVE SERVICES) of corporation authorized in home state or contact address of Florida registered agent: (P.C. KAREN MALLER ONE PROGRESS PLAZA NO.1210 ST. PETERSBURG (City) gent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointment of the provisions of all statutes resistered agent.	ountry to be carried out in state of Florida) D. Box NOT acceptable) , Florida 3370 \ (Zip code) ice of process for the above stated corporation at the planent as registered agent and agree to act in this capacity telative to the proper and complete performance of my desired.

- 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. DIR	ECTORS
Chairman	t:
Address:	
Vice Cha	irman:
	- Arton Ou &
Director:	LEOPOLDO RODRIGUEZ
Address:	2248 MERIDIAN BOULEVARD, SUITE H
	MINDEN, NV 89423
Director:	MARGARITA ZINGG
Address:	2248 MERIDIAN BOULEVARD, SUITE H
	MINDEN, NV 89423
B. OFF	ICERS
President	MARGARITA ZINGG
Address:	2248 MERIDIAN BOULEVARD, SUITE H
	MINDEN, NV 89423
Vice Pres	ident:
Address:	
Secretary:	LEOPOLDO RODRIGUEZ
Address:	2248 MERIDIAN BOULEVARD, SUITE H, MINDEN, NV 89423
Treasurer	MARGARITA ZINGG
Address:	2248 MERIDIAN BOULEVARD, SUITE H, MINDEN, NV 89423
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13	Margalia ango President
., NAC	(Signature of Director or Officer listed in number 12 of the application)
14	(Typed or printed name and capacity of person signing application)



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **INVOICE INVESTORS INC.**, as a corporation duly organized under the laws of **Nevada** and existing under and by virtue of the laws of the State of Nevada since **September 22**, **2004**, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on September 22, 2004.

DEAN HELLER
Secretary of State

Certification Clerk