# F0400000 6411

(Re	equestor's Name)	
(Ad	ldress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	<del>)</del>
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
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### TRANSMITTAL LETTER

TO: Registration So Division of Co				
SUBJECT: Pertimo				
	(Name of corpor	ration - must include suffix	)	
Dear Sir or Madam:				
	tion by Foreign Corporation ce," and check are submitted orida.			
Please return all corres	pondence concerning this ma	atter to the following:		
Jean Poncet				
	(Nam	e of Person)		
Pertimm, Inc.				
	(Firm	/Company)		101
500 Golf Tee Lane #21	6			NON 10
	(A	Address)	S	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Longwood, FL 32779			ASSEE	
	(City/Sta	ate and Zip code)		
For further information	concerning this matter, plea	se call:	FLORES	59
Jean Poncet	at ( 321	) 228-7087		
(Name of Pers	on) (Ar	ea Code & Daytime Teleph	none Number)	
STREET ADI Registration Se Division of Co 409 E. Gaines S Tallahassee, FI	ection rporations St. 2 32399	MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section Corporations 27	
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 : Certificate of Certified Cop	Status &

#### · 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.

	corporation; must include "INCORPORAT Corp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"		
(If name unavai	lable in Florida, enter alternate corporate na	ıme	adopted for the purpose of transacting busi	ness in Florida	 )
Nevada		3	94-3401503		
	under the law of which it is incorporated)		(FEI number, if applicable	)	-
June 12, 2001		5	perpetual		
	e of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")		-	
None					
			n Florida, if prior to registration)		_
		7.10	502, F.S., to determine penalty liability)		
500 Golf Tee L	ane #216, Longwood, FL 32779				_
	(Principal office	adqı	ress)		
500 Golf Tee L	ane #216, Longwood, FL 32779  (Current mailing	مطط			_
	(Curent manning	auu	1635)	# <b>4</b>	
Software Publi	sher				
• ———	sher s) of corporation authorized in home state o	r co	ountry to be carried out in state of Florida)	NOV-	
(Purpose(	s) of corporation authorized in home state o		,	OF MOA - 3 1	<b>-</b> .
(Purpose(	s) of corporation authorized in home state of et address of Florida registered agent: (		,	L ,	<b>-</b> ,
(Purpose(	s) of corporation authorized in home state o		,	L ,	
(Purpose)	s) of corporation authorized in home state of et address of Florida registered agent: (		,	L ,	
(Purpose( Name and streen Name:	s) of corporation authorized in home state of et address of Florida registered agent: (  Jean Poncet		,	ANIO: 5	

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.

- 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: Jean Poncet					
500 Golf Tee Large #216 Longwood, FL 32779					
Vice Chairman:					
Address:					
	<del></del>				
Director:					
Address:					
Director:					
Address:					
B. OFFICERS					
President: Jean Poncet	<del></del>				
500 Golf Tee Lane #216 Longwood, FL 32779					
Vice President:	<b>≱</b> .,				
Address:	0,1				
Addition.	9 1				
Secretary: Patrick Constant	SS. 40 mg				
318 N Carcon Street #208 Carcon City NV 80701	7 3 7				
	5				
Treasurer: Xavier Mignon	<u>D</u> 9				
Address: 318 N Carson Street #208, Carson City NV 89701					
NOTE: If necessary was many ottack on addendum to the application listing additional off	icars and/or divestors				
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 of the applicati	ion)				
14. Jean Poncet	•				
(Typed or printed name and capacity of person signing application	n)				



## 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, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability 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, **PERTIMM, 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 June 12, 2001, 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 November 2, 2004.

DEAN HELLER Secretary of State

Dear Heller

By Certification Clerk

