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ALLAHASSEE, FLORIDA

06/16/05



TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: MG Investment (Name of corpora	it Group, Inc.
(Name of corpora	ntion - must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation if "Certificate of Existence", and check are submitted to transact business in Florida.	
Please return all correspondence concerning this ma	tter to the following:
David M. Gesualdo	
(Name	of Person)
MG Investment Gr	oup, Inc.
(Firm/	Company)
3017 Naughton Way	W05-28472
(Ā	idress)
Tarpon Springs, F	L 34688 PM 5 TI
Tarpon Springs, F	te and Zip code)
	55 5
For further information concerning this matter, pleas	e call:
David Gesualdo 20072	1 1 947-4027
at (, w	ea 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	S78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 8, 2005

DAVID M. GESUALDO MG INVESTMENT GROUP, INC. 3017 NAUGHTON WAY TARPON SPRINGS, FL 34688

SUBJECT: MG INVESTMENT GROUP, INC.

Ref. Number: W05000028472

We have received your document for MG INVESTMENT GROUP, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The adopted name you would like to use is also unavailable. You may wish to call the number below to check any name you'd like to adopt.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers Document Specialist

Letter Number: 205A00040284

05 JUN 15 AM 10: 48
SECKETASY OF STATE
TALLAHASSEE, FLORIDA

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. MG Investment Group, Inc., "Comporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," "Corp.")

	"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	·
	MG-Solutions MG-TG Solutions INC (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
	Oclaware (State or country under the law of which it is incorporated) (FEI number, if applicable)	-
4,	(Date of incorporation) 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")	. =
6.	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502 F.S. to determine penalty liability)	
7.	3017 Naughton Way, Tarpon Springs, FL 34688 (Principal office address) Same as Above	
•	(Current mailing address)	T
8.	(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: Martina Gombalova	-
		~

Office Address: 3017 Naughton Way

Tarpon Springs, Florida 34688
(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.

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PAGE 1

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MG INVESTMENT GROUP, 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 SIXTEENTH DAY OF MAY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF

DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE

EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE

RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT

BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MG INVESTMENT GROUP, INC." WAS INCORPORATED ON THE TWENTY-SECOND DAY OF AUGUST, A.D. 2003.

FLORIDA

Warriet Smith Windson

AUTHENTICATION: 3881002

DATE: 05-16-05

3695893 -8300

050396091

12. Name	s and business addresses of officers and/or directors:
A. DIRE	CTORS ·
Chairman:	David M. Gesualdo
Address: _	3017 Naughton Way
	Tarpon Springs, FL 34688
	man:
Address: _	er en
Director: _	Martina Combalova
	3017 Naughton Way
	Tarpon Springs, FL 34688
_	Ze S
_	
B. OFFIC	
	David M. Gesualdo
A A A A A A A A A A A A A A A A A A A	3017 Naughton Way
Address: _	Tarpon Springs, FL 34688
	, , , , , , , , , , , , , , , , , , , ,
	lent:
Address: _	
_	working Control Land
Secretary:	Marting Gombalova
Address: _	3017 Naughton Way, Tarpon Springs, FL 34688
Treasurer:	Martina Gombalova
Address: _	3017 Naughton Way, Tarpon Springs, FL 34688
NOTE: If	f 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 MAR	RTINA GOMBALOVA DIRECTOR/SECRETARY & TREASURER

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