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(R	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bt	usiness Entity Nar	ne)
(De	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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#### TAYLORMADE MTG. CORP.

35915 N. Hwy. 395 Deer Park, WA 99006

Florida Secretary of State Registration Section - Corporations Division 409 E. Gaines St. Tallahassee, FL 32399

July 27, 2005

To whom it may concern:

Please find enclosed a check for \$87.50 and the application to register for a Certificate of Authority for TaylorMade Mtg. Corp. to Transact Business in Florida.

You will also find enclosed a FedEx shipping label to overnight the documents.

Please contact me directly if there are any further items required. You may reach me toll free at 877-684-9663.

Sincerely,

Sincerely,

Abbie Hirsch

#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: TaylorMade Mtg. Corp.
(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:
Allen Ringer
(Name of Person)
Allen Ringer (Name of Person)  Taylor Made Mg. Corp.  (Firm/Company)
(Firm/Company)
12420 N. Ruby Street
(Address)
Spokane Wash 992/8
(City/State and Zip code)
For further information concerning this matter, please call:
Allew Riviger at (509) 232 2902 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
STREET ADDRESS:  Registration Section  Registration Section
Division of Corporations  Division of Corporations  Division of Corporations
409 E. Gaines St. P.O. Box 6327
Tallahassee, FL 32399 Tallahassee, FL 32314
Enclosed is a check for the following amount:
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$878.75 Filing Fee & ☐ \$878.75 Filing Fee & ☐ Certificate of Status & ☐ Certified Copy

#### 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. TAYLORMADE Mtg. CORP.
(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) (State or country under the law of which it is incorporated) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: | 1003 E Moody Blvd. | BUNNE! | Florida 321/0 | (City) (Zip code) Office Address: 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.

- 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: FRANK TAYLOR		-
Address: 35915 Huy 395 N.		
Dera PARK WA. 99006		
Vice Chairman:		e. 
Address:		
Director:		
Address:		
Director:	- A	
		<del></del>
Addition.		
B. OFFICERS		
President: FRANK TAYLOR		-,
Address: 359/5 Hwy 395 N.		<del></del>
DEER PARK WA 99006		r
Vice President:	* *	<u></u>
Address:		
	1 m 2	
Secretary: Shadda Lee	ECS ST	·
Address: 33310 Hwy 395 N. Dece Part WA 9	99006	· ·
Treasurer:	tages was	
	12.11	<u> </u>
Address:		· · · · · · · · · · · · · · · · · · ·
NOTE: If necessary, you may attach an addendum to the application listing additional officers a	nd/or directors.	
13. Shooth I	,	
(Signature of Director or Officer listed in number 12 of the application)		· · · · · · · · · · · · · · · · · · ·
14. Shadda Lee, Secretary		· 클
(Typed or printed name and capacity of person signing application)		

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### Secretary of State

I, SAM REED, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

## CERTIFICATE OF EXISTENCE/AUTHORIZATION OF TAYLORMADE MTG. CORP.

I FURTHER CERTIFY that the records on file in this office show that the above named Profit Corporation was formed under the laws of the State of WA and was issued a Certificate Of Incorporation in Washington on 9/7/2004.

I FURTHER CERTIFY that as of the date of this certificate, TAYLORMADE MTG. CORP. remains active and has complied with the filing requirements of this office.

Date: July 25, 2005

UBI: 602-426-243

STATE OF WASHINGTON 1889 TO 1889

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Sam Reed, Secretary of State