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TRANSMITTAL LETTER

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SUBJECT:	MORNIN	NGSTAR FINA	NCIAL GRO	JP, INC.				
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Dear Sir or M	1adam:							
	of Existenc	e," and check				act Business in Floenced foreign corp		0
Please return	all corresp	ondence conc	erning this ma	atter to the fo	ollowing:			
			SILVIA P	. ORELLAN	Α			
			(Nam	ne of Person)	1			
		MORNI	INGSTAR FIN	IANCIAL GF	ROUP, INC.		<u></u> _	
			(Firm	/Company)				
			555 116th	AVE NE SUI	TE # 206			- <u>-</u>
		_	(/	Address)				_
		BELL	EVUE, WASI	HINGTON, 9	8004	=		
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Silvia P. O			at (<u>800</u>		-2940	<u> </u>		
(Nar	ne of Perso	on)	(A:	rea Code &	Daytime Telep	hone Number)	l: 20	
Regis Divis 409 E	EET ADD stration Section of Cor E. Gaines S hassee, FL	ction porations St.			MAILING A Registration Division of C P.O. Box 632 Tallahassee,	Section Corporations 27		
Enclosed is a	check for	the following	amount:					
□ \$70.00 Fil	ing Fee	S78.75 Fi	iling Fee & ate of Status		Filing Fee & ed Copy	\$87.50 Filin Certificate Certified C	of Statu	s &

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.

MORNINGSTA	AR FINANCIAL GROUP, INC.			_
(Enter name of c	orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.")	ΈD,	" "COMPANY," "CORPORATION,"	
MORNINGSTA	AR CONSTRUCTION			
(If name unavail	able in Florida, enter alternate corporate n	ame	adopted for the purpose of transacting business in Florida)	
WASHINGTON	N STATE	3.	UBI # 602-360-893	_
(State or country	under the law of which it is incorporated)	_	(FEI number, if applicable)	
01/29/2004		5.	PERPETUAL	
(Date	of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")	
n/a				
	•			
555 116th AVE	NE SUITE #206 BELLEVUE, WA. 980	04		
	(Principal office	add	ress)	
Same as above				
	(Current mailing	add	ress)	
TRANSACT BI	JSINESS IN THE STATE AMPLE FIEL	.D C	DE CONSTRUCTION.	*- 1
Name and stree	et address of Florida registered agent:	(P.C	$0. \text{ Box } \frac{\text{NOT}}{\text{acceptable}}$	
Name:	LUIS ANIBAL ORELLANA			- Artist
flice Address:	1250 SAINT JAMES RD.		20	
	ORLANDO		, Florida <u>32808</u>	
•	(Enter name of country "Inc.," "Co.,"	(Enter name of corporation; must include "INCORPORAT" Inc.," "Co.," "Corp.," "Inc.," "Co," or "Corp.") MORNINGSTAR CONSTRUCTION (If name unavailable in Florida, enter alternate corporate not washington state (State or country under the law of which it is incorporated) 01/29/2004 (Date of incorporation) n/a (Date first transacted busine (SEE SECTIONS 607.1501 & 60 (Principal office) Same as above (Current mailing) TRANSACT BUSINESS IN THE STATE AMPLE FIELD (Purpose(s) of corporation authorized in home state of Name and street address of Florida registered agent: Name: LUIS ANIBAL ORELLANA Tice Address: 1250 SAINT JAMES RD.	(Enter name of corporation; must include "INCORPORATED, "Inc.," "Co.," "Corp.," "Inc.," "Co," or "Corp.") MORNINGSTAR CONSTRUCTION (If name unavailable in Florida, enter alternate corporate name WASHINGTON STATE	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc," "Co.," or "Corp.") MORNINGSTAR CONSTRUCTION (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) WASHINGTON STATE (State or country under the law of which it is incorporated) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 555 116th AVE NE SUITE #206 BELLEVUE, WA. 98004 (Principal office address) Same as above (Current mailing address) TRANSACT BUSINESS IN THE STATE AMPLE FIELD OF CONSTRUCTION. (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Name: LUIS ANIBAL ORELLANA Tice Address: 1250 SAINT JAMES RD.

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.

X Jus A Dulana
(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:

A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman:	·
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	~- <i>-</i>
President: SILVIA P. ORELLANA	7177
Address: 555 116TH AVE NE SUITE 206 BELLEVUE, WASHINGTON 98004	一篇 1
	SA
Vice President: DANNY E. GUERRERO	7 7
Address: 806 141st PLACE SE BELLEVUE, WA. 98007	
	·
Secretary: ANGIE M. GUERRERO	
Address: 555 116th AVE NE SUITE 206 BELLEVUE, WA. 98007	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional of	fficers and/or directors.
13. Silva 8. Willama (Signature of Director or Officer listed in number 12 of the applica	tion)
(Signature of Director of Officer Instead in Humber 12 of the applica	uon <i>j</i>

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



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

CERTIFICATE OF EXISTENCE/AUTHORIZATION OF

MORNINGSTAR FINANCIAL GROUP, INC.

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 1/29/2004.

I FURTHER CERTIFY that as of the date of this certificate, MORNINGSTAR FINANCIAL GROUP, INC. remains active and has complied with the filing requirements of this office.

Date: August 9, 2005

UBI: 602-360-893

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

Sam Reed, Secretary of State