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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA COMPLIANCE SPECIALISTS, INC.



DAVE TAYLOR, PRESIDENT

2331 Hanson Place Tallahassee, Florida 32301 Voice: (850) 942-5464 Fax: (850) 942-5111 www.floridacompliance.com

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Examiner's Initials

	CORPORATION	AME(S) & DOCUMENT NUMBER(S), (if known)	
	1	ation Name) (Document #)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	2. <u>(Corp</u>	ration Name) (Document #)	57.2
	3. <u>(Corp</u>	ration Name) (Document #)	
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	Walk in	Pick up time 10-4 Certified Copy	
	☐ Mail out	Will wait Photocopy Certificate of Status	
	NEW FILINGS	AMENDMENTS	
	Profit	Amendment	
	NonProfit	Resignation of R.A., Officer/ Director	
	Limited Liability	Change of Registered Agent	
	Domestication	Dissolution/Withdrawal	
	Other	Merger	
-		AND THE PROPERTY OF THE PROPER	
7	OTHER FILINGS	REGISTRATION/ QUALIFICATION	
	Annual Report		
	Fictitious Name	Eoreign Living Darksonki	
	Name Reservation	Limited Partnership Reinstatement	
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		Trademark	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA	
N. COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED 10. REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA A S	>
MI-COAN, Inc.	
(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)	
a Calibornia 3. 20-1171545	
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
1. May 21 2004 (Duration: Wear corp. will cease to exist or "perpetual")	
(Date of incorporation) (Duration: Wear corp. will cease to exist or "perpetual")	•
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")	
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	
1 3355 ViA Lido, StE F, New Post Beach CA. 92 (Principal office address)	<u>'</u>
(some	
(Corrent mailing address)	
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	
P. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	
Name: Florida Compliana Specialists, Inc.	
realite. The state of the state	
Office Address: 2331 Hawsen Aga	
Tallahasse Florida 37301	
(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.
- 12. Names and business addresses of officers and/or directors:

A. DIRECTORS
Chairman Daniel Cove
Address: 209 B 32 ^M 5+
Newport Beach CA 97663
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
Newport Reach, CA 92663
·
Vice President:
Address:
Secretary:
Address:
Treasurer:
Address:
NOTE: If 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. Danie ove Vesclen + (Typed or printed name and capacity of person signing application)
(-) Land of Lands and and an Lands of L

State of California Secretary of State

CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, BRUCE McPHERSON, Secretary of State of the State of California, hereby certify:

That on the **14TH day of MAY, 2004, M-LOAN, INC.** became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of September 15, 2005.



BRUCE McPHERSON Secretary of State