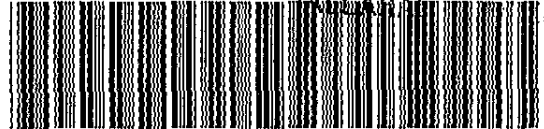


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SECRET
TALLAHASSEE STATE
FLORIDA



900061501319

11/18/05--01038--009 **78.75

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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Office Use Only

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2005 NOV 18 P 3: 20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Linda Otterbeck

Bi-coastal Payroll Solutions, Inc.
9 Solow Lane
Eastnorthport, NY 11731
631 486-8142 or email bicoastal@optonline.net
Fax 631 614-5050

November 15, 2005

State of Florida

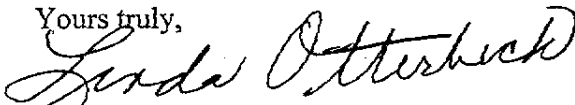
Registration Section
Division of Corporations, Inc.
Po Box 6327
Tallahassee, FL 32314

To whom it may concern:

Enclosed you will find Application By Foreign Corporation For Authorization To Transact Business In Florida for Blue Link International, Inc. an Illinois corporation that I wish to file in Florida.

I have enclosed a filing fee of \$78.75. Please return any necessary papers in the envelope that I have provided.

Yours truly,


Linda Otterbeck

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COVER LETTER

2005 NOV 18 P 3: 20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TO: Registration Section
Division of Corporations

SUBJECT: BLUE LINK INTERNATIONAL, INC.

(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:

LINDA OTTERBECK INCORPORATOR

(Name of Person)

BICOASTAL PAYROLL SOLUTIONS, INC.

(Firm/Company)

9 SOLOW LANE

(Address)

EASTNORTHPORT NY 11731

(City/State and Zip code)

For further information concerning this matter, please call:

LINDA OTTERBECK

(Name of Person)

at (631) 486-8142

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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 ☐ \$78.75 Filing Fee & Certificate of Status ☒ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 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.

FILED

2005 NOV 18 P 3:2

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. BLUE LINK INTERNATIONAL, 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)

2. ILLINOIS

(State or country under the law of which it is incorporated)

3. 74-3137912

(FEI number, if applicable)

4. 12/03/2004

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. APPROXIMATE DATE 12/05/2005

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1011 IVES DAIRY RD #210 MIAMI, FL 33179

(Principal office address)

1011 IVES DAIRY RD #210 MIAMI, FL 33179

(Current mailing address)

8. PROMOTIONAL SALES

(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: MARIEL ALVARADO

Office Address: 1011 IVES DAIRY RD #210

MIAMI

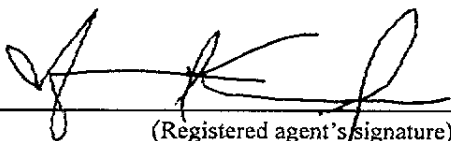
(City)

, Florida 33179

(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:

FILED

2005 NOV 18 P 3:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. DIRECTORS

Chairman: MARIEL ALVARADO

Address: 1011 IVES DAIRY RD #210
MIAMI, FL 33179

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: MARIEL ALVARADO

Address: 1011 IVES DAIRY RD #210
MIAMI, FL 33179

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. 

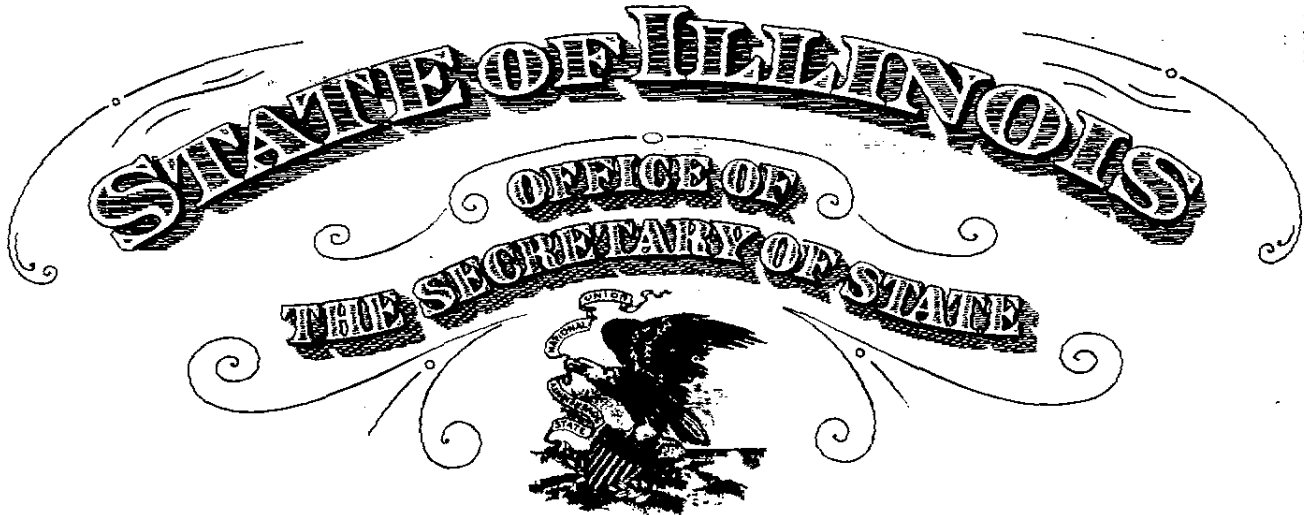
(Signature of Director or Officer listed in number 12 of the application)

14. **DIRECTOR**

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

File Number

6387-405-1



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

BLUE LINK INTERNATIONAL, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE DECEMBER 3, 2004, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE FILING OF ANNUAL REPORTS AND PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS*****



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this

day of NOVEMBER 2ND A.D. 2005

Jesse White

SECRETARY OF STATE