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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: CTS Consultants + Associates, 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:
Karen Jones
(Name of Person)
(Firm/Company)
4353 Legacy Ct. (Address) Delray Beach, Fz 33445
(Address)
Delray Beach, Fz 33445
(City/State and Zip code)
For further information concerning this matter, please call:
Karen Jones at (305, 323-1556
(Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount: MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 7, 2005

KAREN JONES 4353 LEGACY CT. DELRAY BEACH, FL 33445

SUBJECT: CTS CONSULTANTS & ASSOCIATES, INC.

Ref. Number: W05000044761

We have received your document for CTS CONSULTANTS & ASSOCIATES, 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):

You failed to make the correction(s) requested in our previous letter.

A brief description of the entity's nature of business must be included in the document.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6097.

Letter Number: 205A00061162

Marsha Thomas Document Specialist

Similar of Compositions D.O. DOV 6997 Tollohagana Florida 9991

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.

(If name unavail	able in Florida, enter alten	nate corporate name	e adopted for the purpose of transacting business in Flor	ida)
-		*	20-342-7843 (FEI number, if applicable)	
Sept	12,2005	5	(Duration: Year corp will cease to exist or "perpetual	
(Date	of incorporation)		(Duration: Year corp will cease to exist or "perpetua	al")
			in Florida, if prior to registration)	
	·		502, F.S., to determine penalty liability)	
5.	509 NW	Tare.	Miami, 71 33127	
	(Principal office add	dress)	
			* *	
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1 1	reled page.		ountry to be carried out in state of Florida)	
See au		d in home state or co	country to be carried out in state of Florida)	
(Purpose(s	s) of corporation authorized			
		istered agent: (P.C	O. Box NOT acceptable)	
Name and stree	et address of Florida regi		<u> </u>	
Name and <u>stree</u> Name:	Karen Ti	ines		
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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.

1)

Document Specialist

Letter Number: 705A00059102

The business will provide services to be the overseer of different projects for businesses and individuals along with providing training and assisting with investment opportunities.

A. DIRECTORS Chairman: ___ Vice Chairman; Address: Director: Michael J) Dnes B. OFFICERS President: Vice President: Address: ____ Secretary: ___ Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 13. Michael (Signature of Director or Officer listed in number 12 of the application) (Typed or printed name and capacity of person signing application)

Secretary of State

11/21/05 11:46 PAGE 2/3 RightFAX

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Roger Williams Secretary of State

Office of the Secretary of State

The und

ed, as Secretary of State of Texas, does hereby certify that the document, Articles of

Incorpor.
Business

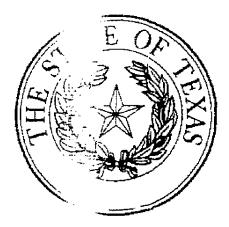
for CTS Consultants & Associates, Inc (filing number: 800537574), a Domestic

oration, was filed in this office on August 29, 2005.

It is furt:

Ified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on November 21, 2005.



Roger Williams

Roger Williams
Secretary of State

Phone: Prenarce - 3-7775 actoria Namez

TTY: 7-1-1 Document: 109412600002