

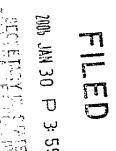
(Re	questor's Name)	
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COVER LETTER

TO: New Filing Section Division of Corporations	.
SUBJECT: REALTY	OPTIONS PLUS, INC.
	corporation - must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corpor "Certificate of Existence," and check are subn transact business in Florida.	ation for Authorization to Transact Business in Florida," nitted to register the above referenced foreign corporation to
Please return all correspondence concerning the	nis matter to the following:
RAFAEL	IN CHAUSTEGUI
	(Name of Person)
REALTY	OPTIONS PLUS, INC. (Firm/Company)
820. N.	PARTON St. # 102
	(Addussa)
< n. 1-n n.	(Address)
SANIA A	NA (A 9270) ity/State and Zip code)
(C	
For further information concerning this matter	nlease call:
For further anormation concerning this matter	, please call:
	2.11
RAFAEL INCHAUSTEGOI at (Name of Person)	(Area Code & Daytime Telephone Number)
(2.0000 02.2.0000)	(A Medi Codo de Sulyamie Totophono I (anioci)
STREET/COURIER ADDRESS: New Filing Section	MAILING ADDRESS: New Filing Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327
Tallahassee, FL 32301	Tallahassee, FL 32314
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$78.75 Filing Fee Certificate of Sta	

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.

1.	1. REALTY OPTIONS PLUS 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	<u>a)</u>				
2.	CALIFORNIA 3. 20-0004915					
_,	(State or country under the law of which it is incorporated) 3. 20-000 4915 (FEI number, if applicable)	_				
4.	. 03-27-2003 5. PERPETUAL					
	(Date of incorporation) 5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")				
6.	i. N/A					
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)					
7.	. 820 N. PARTON ST. #102 SANTA ANA (A 9270) (Principal office address)					
	•					
	820 N. PARTON ST. #102 SANTA ANA, CA 92701 (Current mailing address)					
	<u>ॣ</u>					
8.	LEAL ESTATE SALES	77				
٠.	(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: AL SOUSA	フ				
0	Office Address: 90 S.W. 8+h.St. #203	-				
	Mani (City), Florida 33130 (Zip code)					
1.0	O. Desistand agent's accentance					

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:	
Address:	<u> </u>
Vice Chairman:	
Address:	
Director:	
Address:	
Bi	
Director:	
Address:	<u> </u>
	70%
B. OFFICERS	3 T
President: AL SOUSA	## W F
Address: 820 N. PARTON St. # 102	70 U
SANTA ANA, CA 92201	3. 5
Vice President: PAFAEL INCHAUSTEGUI	
Address: <u>820 N. PARTON ST.</u> # 102	
SANTA ANA CA 92701	
Secretary: AL SOUS A	
Address: 820 N. PARTON St. # 102 SANTA A.	JA CA 92701
Treasurer: AL SOUSA	
Address: 820 N. PARTON St. #102 SANTA AN	JA CA 92701
Address:	DA 42701
NOTE: If necessary, you may aftach an addendum to the application listing additional	officers and/or directors.
13	- - • • • • • • • • • • • • • • • • • •
(Signature of Director or Officer listed in number 12 of the appli	cation)
14. AL SOUSA - PRESIDENT	
(Typed or printed name and capacity of person signing applica	nonj

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 27TH day of MARCH, 2003, REALTY OPTIONS PLUS, 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 January 23, 2006.



BRUCE McPHERSON Secretary of State