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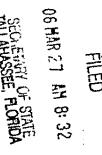
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## **COVER LETTER**

TO: New Filing Section Division of Corporations				
SUBJECT: _ Jaybird & Partners 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:				
Clarence Gualtieri ES S				
(Name of Person)	t.			
Jaybird & Partners Inc.				
(Firm/Company)	j			
6201 Evergreen Avenue				
(Address)				
Seminole, FL 33772 (City/State and Zip code)				
(City/State and Zip code)				
For further information concerning this matter, please call:				
(Name of Person) at (727) 392 -1820  (Area Code & Daytime Telephone Number)				
(Name of Person) (Area Code & Daytime Telephone Number)				
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building Clother Circle Tallahassee, FL 32301  MAILING ADDRESS: New Filing Section Division of Corporations Pivision of Corporations P.O. Box 6327 Tallahassee, FL 32314				
Enclosed is a check for the following amount:				
\$70.00 Filing Fee \$\bigcup \\$78.75 Filing Fee & \bigcup \\$78.75 Filing Fee & \bigcup \\$87.50 Filing Fee,  Certificate of Status Certified Copy 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.
1. Jaubird & Partners Inc.
1. JULY DIFFE V 104 ENCID , 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. New York 3. 56 2350308 路岛
2. New York 3. 56 2350308 Fig. (State or country under the law of which it is incorporated) (FEI number, if applicable)
`h. 177)
4. 3-20-03 5. Duration: Year corp. will cease to exist or "perpers"
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpet)  6
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 6201 Evergreen Avenue, Seminole FL 33772 (Principal office address)
Same as above
(Current mailing address)
8. <u>To purchase and operate business in Florida</u> (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: <u>Clarence Gualtieri</u>
Office Address: 6201 Evergreen Ave.  Seminole, Florida 33772  (City) (Zip code)
Seminale Florida 33772
(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.
Jama Juntieri
(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:	<u>.</u>
Address:	
Vice Chairman:	_
Address:	
	_
Director:	_
Address:	— <u>—</u>
<u> </u>	<u> </u>
Director:	
Address:	<del></del>
B. OFFICERS	
President: Clarence GUALTIERS	
Address: LOZOI EVERGREEN AVE.	
Semuole FL 33772	<u> </u>
Vice President: Lorraine Guartery	
Address: 6201 EVERGLEN HUE	<u> </u>
deservole Fr 33772	
Secretary: Nicholas butterea	
Address: 10598 117th Way N SCHINOLE FL 33	8 <u>17</u> 2
Treasurer: Nicholas Guarter	
Address: 10598 1175 Way N DEDICHOLE 4 33	778
NOTE If pecessary, you may attach an addendum to the application listing additional officers and/or directors.	
\'\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
(Signature of Director or Officer listed in number 12 of the application)	
14. CLARENCE GUALTIERA	

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

## State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of JAY BIRD & PARTNERS, INC. was filed on 03/20/2003, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation. I further certify the following:

A Biennial Statement was filed 06/09/2005.

I further certify, that no other documents have been filed by such Corporation.

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 13th day of March two thousand and six.

Special Deputy Secretary of State

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