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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use on	
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COVER LETTER

TO: New Filing Section Division of Corporations					
SUBJECT: <u>CAPITAL INVESTIGATIONS</u> , INC. (Name of corporation - must include suffix)					
(Chairs of sosporation Bross moisses spirity)					
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:					
BILL BANDALL					
BILL PANDALL (Name of Person)					
CAPITAL INVESTIGATIONS INC.					
CAPITAL INVESTIGATIONS INC. (Firm/Company)					
POB 1986					
(Address)					
(Address) SHINGLE SPRINGS CA 95687 (City/State and Zip code)					
(City/State and Zip code)					
For further information concerning this matter, please call:					
Bill RANDALL at (866) 835-8121 (Name of Person) (Area Code & Daytime Telephone Number)					
(Name of Person) (Area Code & Daytime Telephone Number)					
STREET/COURIER ADDRESS: New Filing Section New Filing Section					
New Filing Section Division of Corporations New Filing Section Division of Corporations					
Clifton Building P.O. Box 6327					
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301					
Enclosed is a check for the following amount:					
\$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & S87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy 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. CAPIT	AL INVESTIGATIO	NS INC.		
(Enter name of co	erporation; must include "INCORPORATED,"		8	
"Inc.," "Co.," "Co	np," *Inc," "Co," or "Corp.")		MAR	10-3-04
•			55	
(75	11 1 77 11		10° - 20° -	1
(II name unavana	ble in Plorida, enter alternate corporate name a	dopted for the purpose of transacting busine	ess in Florida)	
2. <u>CA</u>	ble in Florida, enter alternate corporate name a		_FS_5	
(State or country u	ander the law of which it is incorporated)	(FEI number, if applicable)	SE :	_
4 21281				
	of incorporation)	(Duration: Year corp. will cease to exist or	"perpetual")	
6.				
·	(Date first transacted business in	Florida, if prior to registration)		
	(SEE SECTIONS 607.1501 & 607.150	2, F.S., to determine penalty liability)		
7.5072	HILLSDALE CIRCLE # (Principal office addre	201, EL DORADO HIUS	, CA 915	767
	(Principal office addre	ess)	<u> </u>	
POB 19	186 SHINGLE SPO	21NGS CA 9569	>	
	(Current mailing addre	ess)	<u> </u>	
PRIVAT	E INVESTIGATIONS	B15,0-255		
8. PURMS 7	TO HIRZ STAFF IN F	coar)A		
(Purpose(s)	of corporation authorized in home state or cou	mtry to be carried out in state of Florida)		
9. Name and street	address of Florida registered agent: (P.O.	Box NOT acceptable)		
Name:	Incorp Services, Inc.			
Office Address:	18450 NE 2nd. Ave.			
	Miami	, Florida33179		
	(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.

Interference on behalf of Incorp Services, Inc.
(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: BILL PROPALL Address: 9072 HILLS DALE CIRCLE # 201 EL DORADO HUS, CA 95762 Vice Chairman: Address: Director: PAJL CONWAY, VP Address: 704 6 STRSST # Z03 PETALUMA CA 94952 Director: Tim Goasy, V? Address: 655 N. CINTRAL AVE 17 TH FLOOR GLENDALE, CA 91203 B. OFFICERS President: Bun RADALL Address: /S AROVE Address: Socretary: Bu Pravo acc 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. Bur Past Dear (Typed or printed name and capacity of person signing application)

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 28th day of February, 2001, CAPITAL INVESTIGATIONS, 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 March 17, 2006.



BRUCE McPHERSON Secretary of State