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Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Gotfroy Rublishing, Ltd. (Name of corporation - must include suffix)		
(Name of corporation - must include surfix)		
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:		
Helen Gnotron		
(Name of Person)		
Charlod Lagrania Cta.		
1050 N. State Street. Lobby 2		
(Address)		
Micago, IL GOOIO		
(City/State and Zip code)		
For further information concerning this matter, please call:		
Helen Gotton :312, 944-4995		
(Name of Person) (Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS: MAILING ADDRESS:		
New Filing Section New Filing Section Division of Corporations 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 \$\ \text{S78.75 Filing Fee & S78.75 Filing Fee & Certificate of Status} \text{Certified Copy} \text{Certified Copy} \text{Certified Copy} \text{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.	
Godfron Publishing Ltd. CORP.	
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Corp," "Inc," "Inc," "Corp," "Inc," "Corp," "Inc," "Inc," "Corp," "Inc," "I	
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
2 Majoria 3. 42-1669535	
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. May 6, 2005 5. Perpetual	
(Dark of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	
6. Oate first transacted business in Florida, if prior to registration)	
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
, 1050 N. State Steet, Laby 2, Chicago, 16 Co	GIO
921 Indias Loop North, Destin, FL 32550	
(Current mailing address)	
8. Advertising Salls (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	
T _A	
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	
Name: Bachara WHARG	E j
Office Address: 3035 North Meadian	1
701/6/05588 Florida 32312	
(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 pl designated in this application, I hereby accept the appointment as registered agent and agree to act in this capaci	
further agree to comply with the provisions of all statutes relative to the proper and complete performance of my	
and I am familiar with and accept the obligations of my position as registered agent.	
(Registered agent's signature)	
(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:	no City		
A. DIRECTORS	OS MAY SEL		
Chairman:	ACCOUNTY OF THE PARTY OF THE PA		
A diduana	MASSE OF 2:5		
Addiess.	6. 15 Max		
*	The state of the s		
Vice Chairman:			
Address:			
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Director:			
ender a			
Address:			
*			
Director:			
Address:			
47			
B. OFFICERS			
President: True /// (natto	4		
Address: 71 W. GOLDON TOO	rare #308		
Chicon K Goxal	3		
the control of the second			
Vice President:			
Address:			
Secretary:			
Address:			
Treasurer:			
Address:			
NOTE: If necessary, you may attach an addendum to the application	ation listing additional officers and/or directors.		
13. The Coalpon			
(Signature of Director or Officer listed in a	number 12 of the application)		
14. The less Condition (Typed or printed name and capacity of person signing application)			
(Typed or printed name and capacity of	person signing application)		

Communication althor Hirginian



State Corporation Commission

I Certify the Following from the Records of the Commission:

GODFROY PUBLISHING, LTD. is a corporation existing under and by virtue of the laws of Virginia, and is in good standing.

The date of incorporation is May 06, 2005.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date: May 5, 2006

Joel H. Peck, Clerk of the Commission



STATE CORPORATION COMMISSION

Richmond, May 6, 2005

This is to certify that the certificate of incorporation of

GODFROY PUBLISHING, LTD.

was this day issued and admitted to record in this office and that the said corporation is authorized to transact its business subject to all Virginia laws applicable to the corporation and its business. Effective date: May 6, 2005



State Corporation Commission Attest:

Clerk of the Commission