

F06000004409

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

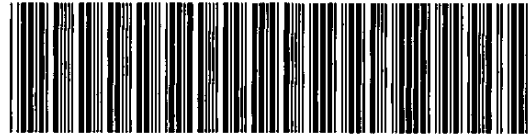
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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06/27/06--01014--007 **87.50

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2006 JUN 27 PM 4:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch JUN 27 2006

T. Burch JUN 27 2006

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Wisebuys 4U, 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:

Crystal Borgen

(Name of Person)

Wisebuys 4U, Inc.

(Firm/Company)

PO Box 580

(Address)

Gladstone, OR 97027

(City/State and Zip code)

For further information concerning this matter, please call:

Crystal Borgen

(Name of Person)

at (503) 659-6800

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 Filing Fee, 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.

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TALLAHASSEE, FLORIDA

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1. WISEBUYS 4U, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

WISEBUYS AUTO GLASS

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. OREGON

(State or country under the law of which it is incorporated)

3. 72 1532215

(FEI number, if applicable)

4. 09-05-2002

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. June 01, 06

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 262 N 1ST ST # 2 , KALAMA, WA 98625

(Principal office address)

PO BOX 580 GLADSTONE, OR 97027

(Current mailing address)

8. TO CONDUCT BUSINESS IN FL FOR AUTO GLASS SALES

(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: REGISTERED AGENTS LEGAL SERVICES, INC

Office Address: 1333 NORTH DUVAL STREET

TALLAHASSEE

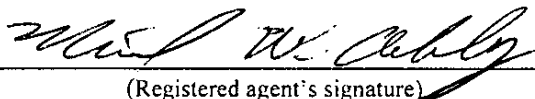
(City)

, Florida 32303

(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.



(Registered agent's signature)

MICHAEL W. ASHLEY

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: N/A

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Timothy D. Scheehean

Address: 5444 SE International Way #B

Milwaukie, OR 97222

Vice President: Same

Address: _____

Secretary: Same

Address: _____

Treasurer: _____

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. Timothy D. Scheehean, President

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

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TALLAHASSEE, FLORIDA

CERTIFICATE

State of Oregon

OFFICE OF THE SECRETARY OF STATE
Corporation Division

I, BILL BRADBURY, Secretary of State of Oregon, and Custodian of the Seal
of said State, do hereby certify:

WISEBUYS 4U, INC.

was

incorporated

under the Oregon

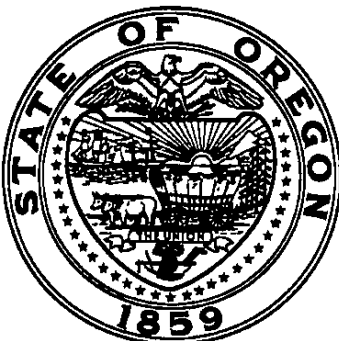
Business Corporation Act

on

September 5, 2002

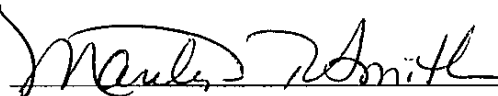
and is active on the records of the Corporation Division as
of the date of this certificate.

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TALLAHASSEE, FLORIDA



*In Testimony Whereof, I have hereunto set
my hand and affixed hereto the Seal of the
State of Oregon.*

BILL BRADBURY, Secretary of State

By 
Marilyn R. Smith
April 28, 2006