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(City/State/Zip/Phone #)

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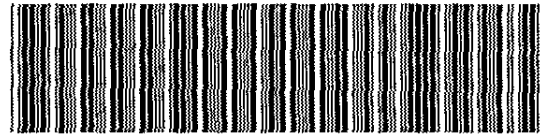
(Business Entity Name)

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 12, 2006

J, SMILES
201 WILSHIRE BLVD SUITE A-20
SANTA MONICA, CA 90401

SUBJECT: B, INC
Ref. Number: W06000030169

We have received your document for B, INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes
Document Specialist

Letter Number: 806A00043954

**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. **B, INC**

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

B Universal, Inc

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

2. **NEVADA**

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

3. _____

(FEI number, if applicable)

4. **AUG 18TH, 2005**

(Date of incorporation)

5. _____

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

6. _____

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

7. **100 LINCOLN RD # 1624 MIAMI BEACH, FL 33139**

(Principal office address)

100 LINCOLN RD # 1624 MIAMI BEACH, FL 33139

(Current mailing address)

8. **TO OBTAIN, PURCHASE, MAINTAIN AND MANAGE PROPERTIES AND BUSINESSES**

(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: **J, SMILES**

Office Address:

100 LINCOLN RD # 1624

MIAMI BEACH

(City)

, Florida

33139

(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)

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.

FILED
06 JUL 31 AM 9:33
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: J, SMILES

Address: 100 LINCOLN RD # 1624
MIAMI BEACH, FL 33139

Vice Chairman: J, SMILES

Address: 100 LINCOLN RD # 1624
MIAMI BEACH, FL 33139

Director: J, SMILES

Address: 100 LINCOLN RD # 1624
MIAMI BEACH, FL 33139

Director: J, SMILES

Address: 100 LINCOLN RD # 1624
MIAMI BEACH, FL 33139

B. OFFICERS

President: J, SMILES

Address: 100 LINCOLN RD # 1624
MIAMI BEACH, FL 33139

Vice President: J, SMILES

Address: 100 LINCOLN RD # 1624
MIAMI BEACH, FL 33139

Secretary: J, SMILES

Address: 100 LINCOLN RD # 1624 MIAMI BEACH, FL 33139

Treasurer: J, SMILES

Address: 100 LINCOLN RD # 1624 MIAMI BEACH, FL 33139

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. J, SMILES

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

FILED
06 JUL 31 AM 9:32
TALLAHASSEE, FLORIDA

SECRETARY OF STATE



FILED
06 JUL 3 AM 9:32
TALLAHASSEE, FLORIDA

CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **B, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since August 18, 2005, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on June 26, 2006.



Dean Heller

DEAN HELLER
Secretary of State

By

Chak

Certification Clerk