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## **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: Evader, Inc.	
(Name of corpora	ntion - must include suffix)
Dear Sir or Madam:	·
The enclosed "Application by Foreign Corporation f "Certificate of Existence," and check are submitted t transact business in Florida.	for Authorization to Transact Business in Florida," to register the above referenced foreign corporation to
Please return all correspondence concerning this mat	tter to the following:
Robert B. Macaulay	
(Name	of Person)
Adorno & Yoss LLP	
(Firm/	Company)
2525 Ponce de Leon Boulevard, Suite 400	
(A	ddress)
Coral Gables, FL 33134	
(City/Sta	te and Zip code)
For further information concerning this matter, pleas	se call:
Robert B. Macaulay at ( 305	460-1000
	ea 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 & Sertificate 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. Evader, Inc.				
	corporation; must include "INCORPORAT Corp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"	_
(If name unavai	lable in Florida, enter alternate corporate na		adopted for the purpose of transacting business in Florida)	-
2. Nevada		3	91-2035127	
	under the law of which it is incorporated)		(FEI number, if applicable)	_
4. 08/24/1995		5.	perpetual	
(Dat	e of incorporation)	٠.	(Duration: Year corp. will cease to exist or "perpetual")	_
6. N/A				
			n Florida, if prior to registration) 502, F.S., to determine penalty liability)	_
7. 12360 NE 8th St	rect, Suite 150, Bellevue, WA 98005		-	
	(Principal office	add	ress)	_
720 NE 69th Str	eet, Suite 16 West, Miami, FL 33138			
	(Current mailing	add	ress)	-
8. Any lawful busi	iness.		****	
(Purpose(	s) of corporation authorized in home state of	or co	ountry to be carried out in state of Florida)	-
9. Name and stre	et address of Florida registered agent: (	P.C		سرميد
Name:	Robert B. Macaulay		TARY ASSE	
Office Address:	2525 Ponce de Leon Boulevard, Suite 40	)0	PH E. FL	m
	Coral Gables		, Florida 33134	J
	(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.

(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: Ken Kelley Address: 12360 NE 8th Street, Suite 150, Bellevue, WA 98005 Vice Chairman: \_\_\_ Address: Douglass Wright Director: 720 NE 69th Street, Suite 16 West, Miami, FL 33138 Address: Jerry Donatelli Director: 12360 NE 8th Street, Suite 150, Bellevue, WA 98005 Address: **B. OFFICERS** President: Ken Kelley Address: 12360 NE 8th Street, Suite 150, Bellevue, WA 98005 Vice President: Address: Douglass Wright Secretary: Address: 720 NE 69th Street, Suite 16 West, Miami, FL 33138 Douglass Wright Treasurer: 720 NE 69th Street, Suite 16 West, Miami, FL 33138 Address: NOTE: If necessary, 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) Douglas Wright, Sccretary/Treasurer (Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE



## 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, EVADER, 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 24, 1995, 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 September 27, 2006.

DEAN HELLER Secretary of State

By

Certification Clerk