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(Requestor's Name)
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PICK-UP WAIT MAIL
(Dusiness Fully Number
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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SECRETARY OF STATE
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COVER I	LETTER DEC -8 PH
TO: New Filing Section Division of Corporations	MLLANASSEE FLOSTE
SUBJECT: Aurora Business Serv	
(Name of corporat	ion - must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation fo "Certificate of Existence," and check are submitted to transact business in Florida.	
Please return all correspondence concerning this matte	er to the following:
Michael E. Rzepecki	
(Name o	of Person)
Aurora Business Services, Inc	•
(Firm/C	ompany)
3951 Windward Passage Circl	e, #201
· ·	dress)
Bonita Springs, FL 34134	
(City/State	e and Zip code)
For further information concerning this matter, please	
Paul J. Mahoney at 952	
(Name of Person) (Area	Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations	MAILING ADDRESS: New Filing Section Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	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 & \$87.50 Filing Fee, Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	2001.220	Δ
		TATUTES, THE FOLLOWING IS SUBMITTED TO BUSINESS IN THE STATE OF FLORIDA.
Aurora E	Business Services, Inc.	
(Enter name of co	orporation; must include "INCORPORATED, orp," "Inc," "Co," or "Corp.")	BUSINESS IN THE STATE OF FLORIDA. """COMPANY," "CORPORATION," adopted for the purpose of transacting business in Florida)
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)
₂ Minneso	ota 3.	41-1908271
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)
4. May 14,	1998	Perpetual
	of incorporation)	(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 3951 Wii	ndward Passage Circle,	#201, Bonita Springs, FL 34134
/·	(Principal office add	
3951 Wi	ndward Passage Circle,	#201, Bonita Springs, FL 34134
	(Current mailing add	ress)
<u> </u>	I has moved from Hopkin of corporation authorized in home state or co	ns, MN to Bonita Springs, FL ountry to be carried out in state of Florida)
9. Name and stree	t address of Florida registered agent: (P.C	D. Box NOT acceptable)
Name:	Michael E. Rzepecki	
Office Address:	3951 Windward Passa	ge Circle #201
	Bonita Springs	, Florida 34134
	(City)	(Zip code)
designated in this further agree to co	ed as registered agent and to accept servi application, I hereby accept the appointn	ce of process for the above stated corporation at the place nent as registered agent and agree to act in this capacity. I elative to the proper and complete performance of my duties, sition 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	s and business addresses of officers and/or directors:
A. DIREC	etors 06 of the latest terms
Chairman:	Michael E. Rzepecki
Address:	And business addresses of officers and/or directors: OFFICERS Michael E. Rzepecki 3951 Windward Passage Circle, #201
	Bonita Springs, FL 34134
Vice Chairn	nan:
Address:	
_	
Director: _	
Address: _	
_	
Director: _	
	•
_	
B. OFFIC	
President: _	MICHAEL E. KLEPECKI
Address:	3951 Windward Passage Cir. #201
_	MICHAEL E. RZEPECKI 3951 Windward Passage Cir. #201 Bonita Springs, FL 34134
	ent:
Address:	
_	
Secretary: _	
Address:	
Treasurer: _	
Address:	
NOTE: If	necessary, you,may attach an addendum to the application listing additional officers and/or directors.
13	Mit Sanali.
13	(Signature of Director or Officer listed in number 12 of the application)
14. Mi c	chael E. Rzepecki
	(Typed or printed name and capacity of person signing application)

state of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: Aurora Business Services, Inc.

Date Formed: 05/14/1998

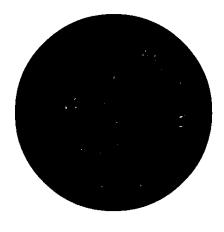
Chapter Governed By: 302A

This certificate has been issued on 11/21/06.

FILED.

06 DEC -8 PH 2: 37

SECRETARY OF STATE
SECRETARY OF STATE



Mary Hiffmager Secretary of State.