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COVER LETTER

Division of Corporations
SUBJECT: GOLDEN SPECIALTIES INC (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:
MARGUITA BERGMAN ZARETSKY (Name of Person)
GOLDEN SPECIALTIES INC. (Firm/Company)
7445 N. WASHTENAW AVE
(Address) CHICAGO IL 60645 (City/State and Zip code)
(City/State and Zip code)
For further information concerning this matter, please call:
NARGUITA REAGMAN ZARETSKY 773) 381-5153 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: MAILING ADDRESS:
New Filing Section New Filing Section
Division of Corporations Clifton Building Division of Corporations 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 \$78.75 Filing Fee & \$78.75 Filing Fee & \$87.50 Filing Fee, Certificate of Status Certified Copy 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.

(Enter name of co	V SPECIALTIES /	DRATED," "COMPANY," "CORPORATION,"	
"Inc.," "Co.," "Co	orp," "Inc," "Co," or "Corp.")	Addition, Cold Old Flori,	
$\sqrt{}$			
(If name unavaila	ible in Florida, enter alternate corpor	rate name adopted for the purpose of transacting business in	n Florida)
2. 1LLINO	15``.' ^a	35-2164293	•
(State or country	ander the law of which it is incorpora	3. 35-2164293 (FEI number, if applicable)	
4. MARCH	15, 2002	S. PERPETUAL	
(Date	of incorporation)	5. PERPETUAL (Duration: Year corp. will cease to exist or "pe	erpetual")
6			
		business in Florida, if prior to registration) & 607.1502, F.S., to determine penalty liability)	
	•		27.63
7. <u>3543</u>	COCOPLUM CIT	RCLE COCONUT EREEK FL 3 office address)	306 3
	(Principal c	office address)	
· · · · · · · · · · · · · · · · · · ·	Same as above	ailing address)	
1	(Current ma	ailing address)	
¹ 8. <u>S€LL L</u>	lauor		
(Purpose(s) of corporation authorized in home	state or country to be carried out in state of Florida)	2
9. Name and stree	t address of Florida registered ag	ent: (P.O. Box NOT acceptable)	2007 FEB
		느 · · · · · · · · · · · · · · · · · · ·	
Name:	ARARA IMPORT	Inci	FEB TEB
Name: Office Address:			ARY -2
	3543 COCOPLUM	L CIRCLE EE	ARY -2
	3543 COCOPLUM		ARY -2
Office Address:	3543 COCOPLUM COCONUT CREEK (City)	L CIRCLE EE	EB-2 PH 1:21
Office Address: 10. Registered as	3543 COCOPLUM COCONUT CREEK (City) gent's acceptance:	CIRCLE SSEE SSEE	-2 PH 1:21
Office Address: 10. Registered as Having been nam designated in this	3543 COCOPLUM COCONUT CREEK (City) gent's acceptance: ed as registered agent and to acceptance application, I hereby accept the	CIRCLE, Florida 33063 (Zip code) Cept service of process for the above stated corporation appointment as registered agent and agree to act in	On at the place this capacity. I
Office Address: 10. Registered as Having been nam designated in this further agree to co	3543 COCOPLUM COCONUT CREEK (City) gent's acceptance: ed as registered agent and to acc application, I hereby accept the omply with the provisions of all s	, Florida 33063 (Zip code) cept service of process for the above stated corporation appointment as registered agent and agree to act in statutes relative to the proper and complete performant	On at the place this capacity. I
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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: MARGUITA BERGMAN ZARETSKY TALECRE ? PA
12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: MARGY ITA BERGMAN ZARETSKY Address: 7445 N. WASHTENAW AVE 12007FEB 12007FEB 12007FEB 12007FEB 12107FEB 12007FEB 12007FEB
Chairman: MARGUITA BERGMAN ZARETSKY Address: 7445 N. WASHTENAW AVE CHICAGO, IL 60645 Via Chairman: Source Obstante
Vice Chairman: Same above
Address: Same above
Director: Same above
Address: <u>some</u> abone
Director: Same above
Address: same abone
B. OFFICERS
President: Same above
Address: pame akoul
Vice President: <u>same</u> abort
Address: <u>same above</u>
Secretary: Same above
Address: some above
Treasurer: Some above
Address: <u>some</u> above
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. Harginto Bergman Louitobry (Signature of Director or Officer listed in number 12 of the application)
14. MARGUITA BERGMAN ZARETSKY — PRES / CED (Typed or printed name and capacity of person signing application)

File Number

6212-460-1



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

GOLDEN SPECIALTIES, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MARCH 21, 2002, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 3RD day of JANUARY A.D. 2007

Desse White