

### Florida Department of State

Division of Cornorations Public Access System

#### Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000109695 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number : (850)205-0381

Account Name : WINDERWEEDLE, HAINES, WARD & WOODMAN, P.A.

Account Number: 076077002775

Phone : (407)246-8450

Fax Number

: (407)423-7014

#### FOREIGN PROFIT/NONPROFIT CORPORATION

Century Group, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help



## 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 corporation; must include "INCORPORATED," "CO. "PANY," "CORPORATION," "Inc.," "Co," "Corp." "Inc.," "Co," or "Corp.")  Century Group, Inc. of Nevada (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)  Nevada 3. 20-4825424 (State or country under the law of which it is incorporated)  April 19, 2006 (Duration: Year corp. will cease to exist or "perpetual")  Lupon qualification  (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502; F.S., to determine penalty liability)  (Principal office address)  100 West Lucerne Circle, Suite 601, Orlando, Florida 32801  (Principal office address)  100 West Lucerne Circle, Suite 601, Orlando, Florida 32801  (Current mailing address)  8. any lawful activity (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:  Gary D. Lipson  Office Address:  390 N. Orange Avenue, Suite 1500  Orlando  (City)  (City)  (City)  Orlando 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.	1. Century G	Group, Inc			_
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)  Nevada  (State or country under the law of which it is incorporated)  April 19, 2006  (Date of incorporation)  (Date first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502; F.S., to determine penalty liability)  100 West Lucerne Circle, Suite 601, Orlando, Florida 32801  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  Name:  Gary D. Lipson  Office Address:  390 N. Orange Avenue, Suite 1500  Orlando  (City)  Orlando  (City)  Orlando 1500  Orlando 1500  (City)  Orlando 1500  Orlando	(Enter name of co	orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.")	ED,	," "COMPANY," "CORPORATION,"	
(State or country under the law of which it is incorporated)  (State or country under the law of which it is incorporated)  (FEI number, if applicable)  (Date of incorporation)  (Date of incorporation)  (Date of incorporation)  (Date first transacted business in Plorida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  (Date first transacted business in Plorida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  (Principal office address)  100 West Lucerne Circle, Suite 601, Orlando, Florida 32801  (Current mailing address)  (Principal office address)  (Principal office address)  (Current mailing address)  (Principal office address)  (Our state or country to be carried out in state of Florida)  (Principal office address)  (Principal office address)  (Our state of Florida 32801  (Current mailing address)  (Principal office address)  (Our state of Florida 32801  (Current mailing address)  (Principal office address)  (Principal office address)  (Our state of Florida 32801  (City)  (Principal office address)  (Principal office address)  (Our state of Florida 32801  (City)  (Principal office address)  (Principal office address)  (Our state of Florida 32801  (City)  (Principal office address)  (Our state of Florida 32801  (City)  (Principal office address)  (Our state of Florida 32801  (City)  (Principal office address)  (Our state of Florida 32801  (City)  (Our state of Florida 32801  (City)  (Our state of Florida 32801  (City)  (Our state of Florida 42801  (City)  (Our state of F	Century Gro	oup, Inc. of Nevada			
(State or country under the law of which it is incorporated)  (A April 19, 2006  (Date of incorporation)  (Portice address)  (Portice address)  (Portice address)  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  (Current mailing address)  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida authorized in home state or country to be carried out in state of Florida authorized in home state or country in the proporation authorized in home state or country in the proporation authorized in home state or country in the proporation authorized in home s	(If name unavails	able in Florida, enter alternate corporate n	ame	adopted for the purpose of transacting business in Florida)	-
4. April 19, 2006 (Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registeration) (SEE SECTIONS 607.1501 & 607.1502; F.S., to determine penalty liability) 7. 100 West Lucerne Circle, Suite 601, Orlando, Florida 32801 (Principal office address)  100 West Lucerne Circle, Suite 601, Orlando, Florida 32801 (Current mailing address)  8. any lawful activity (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. Bo:: NOT acceptable) Name:  Gary D. Lipson  Office Address:  Orlando  Orlando  (City)  Thorida  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.	<sub>2.</sub> Nevada		3.	20-4825424	
(Durstion: Year corp. will cease to exist or "perpetual")  6. upon qualification  (Date first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502; F.S., to determine penalty liability)  7. 100 West Lucerne Circle, Suite 601, Orlando, Florida 32801  (Principal office address)  (Principal office address)  (Ourrent mailing address)  8. any lawful activity  (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. Bo:: NOT acceptable)  Name: Gary D. Lipson  Office Address: 390 N. Orange Avenue, Suite 1500  Orlando  (City)  (City)  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 dustes.	(State or country	under the law of which it is incorporated)			-
(Date first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502; F.S., to determine penalty liability)  7 100 West Lucerne Circle, Suite 601, Orlando, Florida 32801  (Principal office address)  100 West Lucerne Circle, Suite 601, Orlando, Florida 32801  (Current mailing address)  8 any lawful activity  (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. Bo:: NOT acceptable)  Name: Gary D. Lipson  Office Address: 390 N. Orange Avenue, Suite 1500  Orlando  (City)  Thorida 32801  (City)  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 duttes.	<sub>4.</sub> April 19, 2	006	5.	percetual	
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502; F.S., to determine penalty liability)  7. 100 West Lucerne Circle, Suite 601, Orlando, Florida 32801  (Principal office address)  100 West Lucerne Circle, Suite 601, Orlando, Florida 32801  (Current mailing address)  8. any lawful activity  (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. Bo:: NOT acceptable)  Name: Gary D. Lipson  Office Address: 390 N. Orange Avenue, Suite 1500  Orlando , Florida 32801  (City)  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.	(Date	of incorporation)	_	(Duration: Year corp. will cease to exist or "perpetual")	•
(SEE SECTIONS 607.1501 & 607.1502; F.S., to determine penalty liability)  7. 100 West Lucerne Circle, Suite 601, Orlando, Florida 32801  (Principal office address)  100 West Lucerne Circle, Suite 601, Orlando, Florida 32801  (Current mailing address)  8. any lawful activity  (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: Gary D. Lipson  Office Address: 390 N. Orange Avenue, Suite 1500  Orlando , Florida 32801  (City) , Florida 42801	<sub>6.</sub> upon qual	ification			_
(Principal office address)  100 West Lucerne Circle, Suite 601, Orlando, Florida 32801  (Current mailing address)  8. any lawful activity  (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: Gary D. Lipson  Office Address: 390 N. Orange Avenue, Suite 1500  Orlando , Florida 32801  (City) , Florida 32801  (City) (Cit		(Date first transacted busin (SEE SECTIONS 607.1501 & 6	ess i 07.1	in Florida, if prior to registration)  502; F.S., to determine penalty liability)	3
(Current mailing address)  8. any lawful activity  (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: Gary D. Lipson  Office Address: 390 N. Orange Avenue, Suite 1500  Orlando  (City)  (City)  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.	<sub>7.</sub> 100 West I				7
(Current mailing address)  8. any lawful activity  (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. Bo;; NOT acceptable)  Name: Gary D. Lipson  Office Address: 390 N. Orange Avenue, Suite 1500  Orlando , Florida 32801  (City) , Florida 32801  (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.	_	, ' '			72
9. Name and street address of Florida registered agent: (P.O. Bo;; NOT acceptable)  Name: Gary D. Lipson  Office Address: 390 N. Orange Avenue, Suite 1500  Orlando  (City)  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.	100 West				
9. Name and street address of Florida registered agent: (P.O. Bo;; NOT acceptable)  Name: Gary D. Lipson  Office Address: 390 N. Orange Avenue, Suite 1500  Orlando  (City)  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.		(Current mailing	g ado	dress)	
9. Name and street address of Florida registered agent: (P.O. Bo;; NOT acceptable)  Name: Gary D. Lipson  Office Address: 390 N. Orange Avenue, Suite 1500  Orlando  (City)  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.	8. any lawful	activity		'04 H	<del>.</del> 9
Office Address:  Office Address:  Office Address:  Orlando  (City)  Orlando  (City)  Orlando  (City)  Orlando  (City)  Thorida 32801  (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.	(Purpose(s	s) of corporation authorized in home state	or c	country to be carried out in state of Florida)	; ( <del>)</del>
Name: Gary D. Lipson  Office Address: 390 N. Orange Avenue, Suite 1500  Orlando  (City)  (City)  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.	9. Name and stree	et address of Florida registered agent:	(P.0	O. Box 'NOT acceptable)	
Orlando  (City)  (City)  (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.					
(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.	Office Address:	390 N. Orange Avenue,	Sι	<u>uite</u> :1500	
(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.		Orlando		. Florida 32801	
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.		(City)			
(Registered agent's sygnature)  11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to	Having been nam designated in this further agree to c and I am familiar 	ed as registered agent and to accept s application, I hereby accept the appo omply with the provisions of all statu with and accept the obligations of m (Registered agent's french	tes i y po ture)	ment .15 registered agent and agree to act in this capa relative to the proper and complete performance of m osition as registered agent.	city. I y dutles,

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.

Florida Dopt. of State Electronic Filing Facsimile Auch No. 1107-0001084953

ess: 100 West Luceri	ne Circle, Suite 601, Orlando, Florida 32801	<u> </u>
		<del></del>
Chairman:		0. 4
ress:	<u></u>	
		7/2
ctor:		35.00
ress:		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
		65
ctor:		<b>2</b>
ress:		
OFFICERS		<u>-</u>
ident: William A. Mob	lev. Jr	
	ne Circle, Suite 601, Orlando, Florida 32801	
ress: 100 tv Oct 20001	The Chief Carlo Co 1, Charles, Florida 52001	, , , , , , , , , , , , , , , , , , ,
ress:		
surer:		
ress:	·	<del></del>
TP. 16		
ir: ii necessary, you may a	ttach an addendum to the application listing additional officers and/or direc	tors.

Fioritie Dept. of State Electronic Filing Facsimile Audit No. HO-2000 10974 53





# CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, 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 seles, 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, CENTURY GROUP, 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 April 19, 2006, and is in good standing in this state.



Electronic Certificate
Certificate Number: C20070419-1151
You may verify this electronic certificate
online at <a href="http://secretaryofstate.biz/">http://secretaryofstate.biz/</a>

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on April 19, 2007.

ROSS MILLER Secretary of State

OT NPR 24 MILLI: 08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA