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COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: NTERNATIONAL LINKS OR PORATION (Name of corporation - must include suffix)		
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for Auth "Certificate of Existence," and check are submitted to regist transact business in Florida.		
Please return all correspondence concerning this matter to the	ne following:	
V		
	son)	
INTERNATIONAL LINKS OR PORATION (Firm/Company)		
	ny)	
7.0, Box 76 270 (Address)		
(Address)		
ST PETERS BURG FL	3373 4	
(City/State and	Zip code)	
For further information concerning this matter, please call:		
•		
MICHEL AMBLARD at (727) 45P 5707 (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	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314	
Enclosed is a check for the following amount:		
	8.75 Filing Fee & \$87.50 Filing Fee, certified Copy Certificate of Status & Certified Copy	



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 20, 2007

MICHEL AMBLARD / INTERNATIONAL LINKS CORPORATION P.O. BOX 76270 ST. PETERSBURG, FL 33734

SUBJECT: INTERNATIONAL LINKS CORPORATION

Ref. Number: W07000013699

We have received your document for INTERNATIONAL LINKS CORPORATION and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

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

- 2 The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.
- pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1150.00.

Please return the original and one copy of 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) 245-6047.

Carolyn Lewis Document Specialist New Filing Section please c

Letter Number: 307A00019276

RECEIVED

with a place

07 APR 27

TA:

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 27, 2007

MICHEL AMBLARD / INTERNATIONAL LINKS CORPORATION P.O. BOX 76270 ST. PETERSBURG, FL 33734

SUBJECT: EXECUTIVE PROJECT CONSULTANTS CORPORATION

Ref. Number: W07000013699

We have received your document for EXECUTIVE PROJECT CONSULTANTS CORPORATION and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1150.00.

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) 245-6047.

Letter Number: 307A00019276

Carolyn Lewis Document Specialist

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07 JUN 18 PM 2:01

DEPARTMENT OF STATE DIVISION OF CORPORATIONS TALLAHASSEF, FLORIDA June 13,2007

Florida Department of State Division of corporations Attn Carolyn Lewis P.O. Box 6327 Tallahassee, Fl 32314

Dear Ms Lewis,

As discussed, I enclose a revised application for registration for Executive Project Consultants Corporation

Thank you for your attention.

Sincerely,

Michel Amblard

APPLICATION BY FÖREIGN 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. INTERNATIONAL LINKS CORPORATION			
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")			
FROJECT			
EXECUTIVE CW SULTAWS Inc. (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)			
2. NEW HAMPSHIRE 3. 02 - 0467449 (State or country under the law of which it is incorporated) (FEI number, if applicable)			
4. MARCH 11, 1996 (Date of incorporation) 5. Early val (Duration: Year corp. will cease to exist or "perpetual")			
▲			
6. May 2007 (Date first transacted business in Florida, if prior to registration)			
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)			
7. 300 BEACH DRIVE NE # 902 STRIERSBURG, FL 33701 (Principal office address)			
7.0. Box 76270 ST LETERS RIRG FC, 33734 (Current mailing address)			
8. Inset Hanasement- International Acretopment			
(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)			
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: MICHEL AMBLARD Name: AMBLARD			
and the state of t			
City) Office Address: STORTERSBURG (City) (City) Office Address: (City) (City) (City) Office Address: (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			

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)

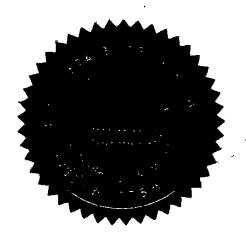
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:	FILED
A. DIRECTORS	JUN 10
Chairman:	TALLAHADAYA
Address:	TALLAHASSEE, FLORIDA
Vice Chairman:	
Address:	
Director: MICHEL AMBLARD	
Address: 300 BEACH DOWE NE #902	
ST DETERSBURG FL 3370/	
Director: JAMELE AMBLARN	
Address: 300 BEACH DRIVE NE # 902	
ST DETERS BURG F 3370/	
B. OFFICERS	
President: AHBLARA	
Address: 300 BEACH DRIVE NE # 902	
ST DETERSBURG, FZ 3370/	
Vice President: SAMBLARA	
Address: 300 BEACH DRIVE NF # 902	
ST 8=7=000 SD 83701	
Secretary: THONAS W. HILARETH ESQ (MCLANE)	, , , , , , , , , , , , , , , , , , ,
Address: 900 Fly Street & ANCHESTER NH. 03	125
Treasurer:Ad BLARD	
Address: Bus Beach Drive ME # 902 ST leterating	E 3370/
Address. State Graph Control of the	· C 05/9
NOTE: If necessary, you may attach an addendum to the application listing additional of	fficers and/or directors.
13.	
(Signature of Director or Officer listed in number 12 of the applica	tion)
14. Michael Amblard President (Typed or printed name and capacity of person signing application)	en)

State of New Hampshire Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify INTERNATIONAL LINKS CORPORATION is a New Hampshire corporation duly incorporated under the laws of the State of New Hampshire on MARCH 11, 1996. I further certify that all fees and annual reports required by the Secretary of State's office have been received and that articles of dissolution have not been filed.



In TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 27th day of February, A.D. 2007

William M. Gardner Secretary of State