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SECRETARY OF STAFF.
TALLAHASSEE, FLORIT

#### **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: VIRTUAL PRIME TIME INVESTMENTS, INC.
(Name of corporation - must include suffix)
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:
NESTOR CUEVAS
(Name of Person)
VIRTUAL PRIME TIME INVESTMENTS, INC.
(Firm/Company)
239 W. TARRINGTON DR.
(Address)
DELAND, FL. 32724
(City/State and Zip code)
For further information concerning this matter, please call:
NESTOR CUEVAS at ( 386 ) 734-8149
(Name of Person) (Area 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 \$\ \text{S78.75 Filing Fee & Gertificate of Status} \text{S78.75 Filing Fee & Gertificate of Status} \text{Certified Copy} \text{S87.50 Filing Fee, Certificate of Status & Certified Copy} \text{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.

(If name unavai	•	e adopted for the purpose of transacting business in Florida) 20-5912923
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)
·	<del></del>	PERPETUAL
(Dat	e of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
·	(Date first transacted business i	in Florida, if prior to registration) 502, F.S., to determine penalty liability)
450 HII I		00, MESQUITE, NV 89027
TOOTHE	(Principal office add	
450 HILL	` •	00, MESQUITE, NV 89027
	(Current mailing add	
	REAL ESTATE INV	
(Purpose(	s) of corporation authorized in home state or co	ountry to be carried out in state of Florida)
Name and street	et address of Florida registered agent: (P.C	
Name:	NESTOR CUEVAS	SE SE
ffice Address:	239 W. TARRINGTON	DR
	DELAND	
	(City)	, Florida 32724
	• ••	, <u>-</u>
Destrict and		
aving been nan esignated in this	application, I hereby accept the appoints	ice of process for the above stated corporation at the place ment as registered agent and agree to act in this capacity. relative to the proper and complete performance of my duti
aving been nan esignated in this orther agree to c	ied as registered agent and to accept servi application, I hereby accept the appoints	ment as registered agent and agree to act in this capacity. relative to the proper and complete performance of my duti
aving been nan esignated in this orther agree to c	ied as registered agent and to accept servi application, I hereby accept the appoint comply with the provisions of all statutes t	ment as registered agent and agree to act in this capacity. relative to the proper and complete performance of my dut

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.

A. DIRECTORS Chairman: \_\_\_\_ Vice Chairman: Address: \_ Director: NESTOR CUEVAS Address: 450 HILLSIDE DR., BLDG B, #200, MESQUITE, NEVADA 89027 **B. OFFICERS** President: NESTOR CUEVAS Address: 450 HILLSIDE DR., BLDG B, #200, MESQUITE, NEVADA 89027 Address: Secretary: GEORGIA A. CUEVAS Address: 450 HILLSIDE DR., BLDG B, #200, MESQUITE, NEVADA 89027 Treasurer: GEORGIA A. CUEVAS Address: 450 HILLSIDE DR., BLDG B, #200, MESQUITE, NEVADA 89027 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) 14. NESTOR CUEVAS, PRESIDENT (Typed or printed name and capacity of person signing application)

12. Names and business addresses of officers and/or directors:

## SECRETARY OF STATE



# 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 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, VIRTUAL PRIME TIME INVESTMENTS, 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 December 4, 2006, and is in good standing in this state.

Electronic Certificate
Certificate Number: C20070627-2438
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 June 27, 2007.

ROSS MILLER Secretary of State