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(Re	equestor's Name)		
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07 AUG 27 AM 9:01

SECRETARY OF STATE DIVISION OF CORPORATIONS

or 8/29/07

TILEO
SECRETARY OF STATE
DIVISION OF CORPORATIONS

### TRANSMITTAL LETTER

07 AUG 27 AM 9:01

Division of Corporations					
SUBJECT: Quality Services Alliance Group, Inc. (Name of corporation - must include suffix)					
Dear Sir or Madam:	,				
The enclosed "Application by Foreign Corporation for a "Certificate of Existence", and check are submitted to retransact business in Florida.					
Please return all correspondence concerning this matter					
MARTHA I. CADAVAD					
MARTHA I. CADAVID (Name of Person)					
Quality Services Alliance Grou (Firm/Cor  11105 DORY CT.  (Address  ORLANDO, FL 32837  (City/State a	of Inc.				
(Firm/Cor	npany)				
11105 DORY CT.					
(Addre	ess)				
ORLANDO, FL 32837	nd Zin coda)				
(City/State a	nd Zip code)				
For further information concerning this matter, please ca	all:				
Everette Duelas Fields = 407	v 923-7356				
Everete Douglas F'elds at (407 (Name of Person) at (407	Code & Daytime Telephone Number)				
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	MAILING ADDRESS: Registration Section Division of Corporations 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 & Sertified Copy \$87.50 Filing Fee, 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.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in	Florida)	_
(State or country under the law of which it is incorporated) (FEI number, if applicable)		-
1 of 1st 2007 Perletical		
State or country under the law of which it is incorporated)  August 1st, 2007  (Date of incorporation)  (Duration: Year corp. will cease to exist or "per	petual")	-
1. Coas and I Backers	•	
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon quali	fication."	·)
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)		
NCH, 101 CONVENTION CENTER Dr. LAS Vegas, NV 891 (Principal office address)	09	_
		-
P.O. BOX 27740 LAS VECAS, NV 89126 (Current mailing address)		_
(Current mailing address)		
Charles Coolins		
(Purpose(s) occorporation authorized in home state or country to be carried out in state of Florida)		· <u>0</u>
	07 AUG 27	VIS
. Name and <u>street address</u> of Florida registered agent: (P.O. Box or Mail Drop Box <u>NOT</u> acceptable	A (	Q.
Name: Everetle Douglas Fields  Office Address: 11105 Doky CT  Oplando , Florida 32837  (City) (Zip code)	2	무
16600 Address 11105 Delv II		COP
office Address: Office Address:	<b>A</b>	βpo,
URLANDO, Florida 3837	9: 01	RAI
(City) (Zip code)		NO.
0. Registered agent's acceptance:		S
laving been named as registered agent and to accept service of process for the above stated corporation		
esignated in this application, I hereby accept the appointment as registered agent and agree to act in t	in cupu	y 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.

(Registered agent's signature)

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

#### A. DIRECTORS

Chairman:		
Address:		
Vice Chairman:		
Address:		
Director: MARTHA ISABEL CADAVED		
Address: 11105 DORY CT.		
ORIANDO, FL 32837		
Director: Everette Douglas Fields	0	_ <u>\</u> 
Address: 11105 Dory CT.	7 AUG	SICR
ORLANDO, FL 32837	G 27	유유
B. OFFICERS	AM	Y OF ORP(
President: MARTHA ISABEL CADAVED	9: 0	STA
Address: 11105 Doky CT.		10. Kg
Orlando, FL 32837		
Vice President: Everette Douglas Fields		<u> </u>
Address: 11105 DORY CT.		
ORLANDO, FL 32837	<del></del>	
Secretary: MARTHA ISABEL CADAVID		
Address: 11105 Doay Ct Orlando FL 32837		
Treasurer: MAATHA ISABEL CADAVED		
Address: 11105 Dorret Orlando FL 32837		
NOTED 16		
NOTE: If necessary, you may attach an adderdum to the application listing additional officers and/or dire	ctors.	
(Signature of Director or Officer listed in number 12 of the application)		
14. Everette Douglas Fields, VICE PRESIDENT		
(Typed or printed name and capacity of person signing application)		

SECRETARY OF STATE



SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 AUG 27 AM 9: 01

## 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, QUALITY SERVICES ALLIANCE 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 August 1, 2007, and is in good standing in this state.

By

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State; at my office on August 7, 2007.

ROSS MILLER

Secretary of State

Janes

Certification Clerk

