

F0700000438

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

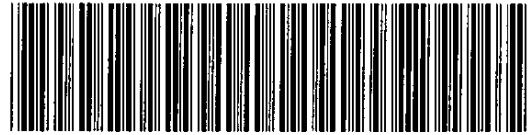
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

VA

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** BESTGLO CORP

(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:

CHRISTINE CLARK

(Name of Person)

BESTGLO CORP

(Firm/Company)

5317 FRUITVILLE ROAD

(Address)

SARASOTA, FL 34232

(City/State and Zip code)

For further information concerning this matter, please call:

CHRISTINE CLARK

(Name of Person)

at ( 904 ) 885 0031

(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    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: CHRISTINE CLARK

Address: 5104 GRACEWOOD LANE, ST AUGUSTINE, FL 32092

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_


Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.   
(Signature of Director or Officer listed in number 12 of the application)

14. CHRISTINE CLARK PRESIDENT  
(Typed or printed name and capacity of person signing application)

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07 AUG 28 PM 1:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**STATE OF WYOMING**  
**Office of the Secretary of State**

FILED

07 AUG 28 PM 1:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby  
certify that according to the records of this office,

**Bestglo Corp.**  
is a  
**Profit Corporation**

formed or qualified under the laws of Wyoming did on **September 2, 2005**, comply with all  
applicable requirements of this office. Its period of duration is Perpetual. This entity has been  
assigned entity identification number **2005-000498959**.

This entity is in existence and in good standing in this office and has filed all annual reports  
and paid all annual license taxes to date, or is not yet required to file such annual reports; and has  
not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed,  
authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming  
on this 20th day of August, 2007 at 5:04 PM. This certificate is assigned 001732720.



*Max Maxfield*  
Secretary of State