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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

mR)

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: ADVANCED PLAN	INING GROUP. INC	
SUBJECT: ADVANCED PLANNING GROUP. INC. (Name of corporation - must include suffix)		
Dear Sir or Madam:		
	on for Authorization to Transact Business in Florida," ed to register the above referenced foreign corporation to	
Please return all correspondence concerning this	natter to the following:	
BERNARD KIESEC (Name of Person)		
(Na	me of Person)	
A DUANCED PO	ANNING GROUP INC.	
(Fin	m/Company)	
775 COUNTRY CHARM CIR (Address)		
OVIEDO, F	L 32765	
OVIEDO, FL 32765 (City/State and Zip code)		
For further information concerning this matter, please call:		
(Name of Person) (Area Code & Daytime Telephone Number)		
(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 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Sertified Copy Certified Copy 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. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. WYOMING
(State or country under the law of which it is incorporated)

3. 27-280885
(FEI number, if applicable) 4. 5/6/2005
5. PERPETUAL
(Date of incorporation)

5. PERPETUAL
(Duration: Year corp. will cease to exist or "perpetual") (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)

775 COUNTRY CHARM CIR, OVIEW, FL 32765
(Current mailing address) (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) BERNARD KIESEL Name: 775 COUNTRY CHARM C.R.

() U1600, FL , Florida 32765

(City) (Zip code) Office Address: 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, and I am familiar with and accept the obligations of my position as registered agent.

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: RERWARD KIESEL 555 WINDERLEY PACE, SUITE 300 MAITLAND, FC 32751 Vice Chairman: Address: __ Director: DAVID CAPOZZI Address: 104 EASTPARK DR, SUITE 321 BRENTWOOD, TN 37027 **B. OFFICERS** President: BERWARD KIESEL Address: 775 COUNTRY CHARM CIR, OVICAO, FC 32765 Vice President: DAUID CAPOZZI Address: 104 EASTPAIL DR, #321 BRENTWOOD, TN 37027 Secretary: DAULO CAPORT Address: Treasurer: BERNALS KIESEL Address: 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) BERNARD KIESEL- PRESIDENT (Typed or printed name and capacity of person signing application)

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

STATE OF WYOMING Office of the Secretary of State

07 OCT 29 PH 3:50

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,

Advanced Planning Group, Inc.

is a Profit Corporation

formed or qualified under the laws of Wyoming did on **May 6, 2005**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2005-000492563**.

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 25th day of October, 2007 at 10:16 AM. This certificate is assigned 001988631.



Maj Massiello
Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.