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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

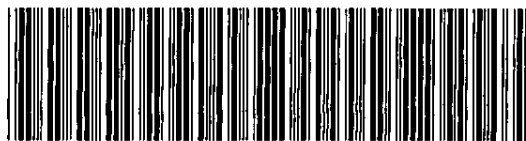
(Document Number)

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Certificates of Status _____

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2008 FEB 27 PM 3:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CF 2-28

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Logistics Resource, 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:

Ping Li
(Name of Person)
Logistics Resource, Inc
(Firm/Company)
2011 Television Place, Suite A
(Address)
Kansas City Mo 64126
(City/State and Zip code)

For further information concerning this matter, please call:

Ping Li at (816) 461-4040 ext 114
(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 & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

08 FEB 28 AM 8:00

DIVISION OF CORPORATIONS

January 30, 2008

PING LI / LOGISTICS RESOURCE, INC. of
2011 TELEVISION PLACE, STE. A
KANSAS CITY, MO 64126

SUBJECT: LOGISTICS RESOURCE, INC.
Ref. Number: W08000005194

We have received your document for LOGISTICS RESOURCE, INC. 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 of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

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

The document must contain both the street address of the principal office and the mailing address of the entity.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 908A00006391

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.

1. Logistics Resources, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

LOGISTICS RESOURCES, INC. OF MISSOURI

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Missouri, USA

(State or country under the law of which it is incorporated)

3. 26-083 7072

(FEI number, if applicable)

4. Aug 27, 2007

(Date of incorporation)

5. perpetual

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

6. Oct. 1, 2007

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2011 Television Pl. Ste A, Kansas City, MO. 64126

(Principal office address)

(Current mailing address)

8. 2011 Television place, suite A Kansas City, mo 64126

(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)

Name: John From

Office Address: 161 W magnolia st

Oviedo,

(City)

FL 32765

(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 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.

X [Signature]

(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.

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TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: peter Sykes
Address: 2011 Television place, Suite A
Kansas City, mo 64126

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Peter Sykes

Address: 2011 Television place, Suite A
Kansas City, mo 64126

Vice President: Nora Sykes

Address: 2011 Television place, Suite A
Kansas City, mo 64126

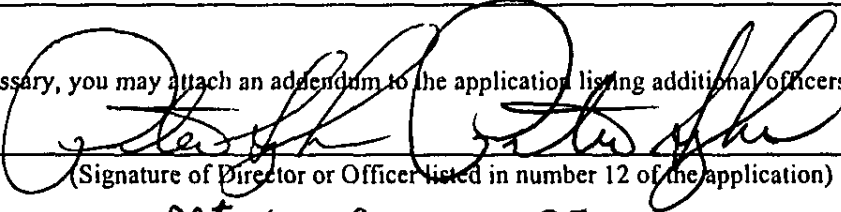
Secretary: Nora Sykes

Address: 2011 Television place Suite A Kansas City mo
64126

Treasurer: _____

Address: _____

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

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

14. Peter Sykes pres.
(Typed or printed name and capacity of person signing application)

STATE OF MISSOURI



Robin Carnahan
Secretary of State

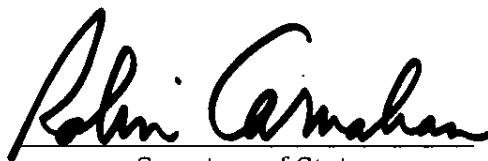
**CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING**

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

**LOGISTIC RESOURCES, INC.
00838916**

was created under the laws of this State on the 28th day of August, 2007, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 3rd day of October, 2007


Secretary of State



Certification Number: 10125015-1 Reference: BMW
Verify this certificate online at <http://www.sos.mo.gov/businessentity/verification>