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(R	equestor's Name)	•
(A	ddress)	
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(C	ity/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nam	ne)
(De	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	



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Office Use Only

#### **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: International Wood Corpo	oration
	tion - must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," and check are submitted to transact business in Florida.	or Authorization to Transact Business in Florida," o register the above referenced foreign corporation to
Please return all correspondence concerning this matt	ter to the following:
Roy I. Schwartz	
(Name	of Person)
Gorski Sober Living Centers, Inc.	
·	Company)
8358 W. Oakland Park Blvd., Suite	100
·	ddress)
Sunrise, FL 33351	
(City/Stat	te and Zip code)
For further information concerning this matter, please	e call:
Roy Schwartz at ( 954	746-8845
(Name of Person) (Are	ea 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 & S78.75 Filing Fee, 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.

	·	adopted for the purpose of transacting business in Florida)
Colorado (State or country under the law of which it is incorporated)		94-3030021
-	•	(FEI number, if applicable)
October 2	e of incorporation) 5.	perpetual (Duration: Year corp. will cease to exist or "perpetual")
August 1,	• •	(Duration: Year corp. will cease to exist or perpetual)
	(Date first transacted business i (SEE SECTIONS 607.1501 & 607.1	n Florida, if prior to registration) 502, F.S., to determine penalty liability)
8358 W. C	Dakland Park Blvd, Suite 100	
	(Principal office add	·
8358 W. C	Dakland Park Blvd, Suite 100 (Current mailing add	
	n any lawful business activity s) of corporation authorized in home state or co	
Name and stre	et address of Florida registered agent: (P.G	D. Box NOT acceptable)
Name:	Name: Gorski Sober Living Centers, Inc.	
fice Address:	8358 W. Oakland Park Blv	d, Suite 100
	Sunrise	, Florida 33351
	(City)	(Zip code)
laving been nan esignated in this orther agree to c	gent's acceptance: ned as registered agent and to accept serve s application, I hereby accept the appoints	ice of process for the above stated corporation at the plo nent as registered agent and agree to act in this capacit relative to the proper and complete performance of my o

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: David Lilly, Esq.
Address: 155 Washington Blvd., Suite 1005
Los Angeles, CA 90015
Vice Chairman: Roy I. Schwartz
Address: 8358 W. Oakland Park Blvd, #100
Sunrise, FL 33351
Director: Nancy Esteves
Address: 2800 Palmer Drive
Hollywood, FL 33021
Director: Alfredo Esteves
Address: 2800 Palmer Drive
Hollywood, FL 33021
B. OFFICERS
President: Roy I. Schwartz
Address: 8358 Oakland Park Blvd., Suite 100
Sunrise, FL 33021
Vice President: Nancy Esteves
Address: 2800 Palmer Drive
Hollywood, FL 33021
Secretary: Esther Bittelman
Address: 8358 W. Oakland Park Blvd., Suite 100, Sunrise, FL 33351
Treasurer: Alfredo Esteves
Address: 2800 Palmer Drive, Hollywood, FL 33021
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
(Signature of Oregin or Officer listed in number 12 of the application)
14. Roy I's shwartz Pusion
(Typed or printed name and capacity of person signing application)

#### International Wood Corp.

#### **Directors**

David Lilly
Roy I. Schwartz
Joshe Bittleman
Esther Bittleman
Nancy Esteves
Alfredo Esteves
Zulfiqar Lakha
Dennis Thomas
Abubakar Shaikhani

#### **Offficers**

David Lilly, CEO, Roy I. Schwartz, President, Esther Bittleman, Secretary, Nancy Esteves, Vice President Marketing, Alfredo Esteves Marketing, Vice President Marketing Zulfiqar Lakha, Chief Financial Officer, Joshe Bittelman, Vice President Sales.

# OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

#### CERTIFICATE

I, Mike Coffman, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

INTERNATIONAL WOOD CORPORATION

### is a Corporation

formed or registered on 03/05/1997 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 19971033500.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 08/01/2008 that have been posted, and by documents delivered to this office electronically through 08/06/2008 @ 16:26:30.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 08/06/2008 @ 16:26:30 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 7151743.



M.k. Coffm

Secretary of State of the State of Colorado

\*End of Certificate\*\*\*\*\*

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <a href="http://www.sos.state.co.us/blz/CertificateSearchCriteriu.do">http://www.sos.state.co.us/blz/CertificateSearchCriteriu.do</a> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.us/click Business Center and select "Frequently Asked Questions."