# F08000004175

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(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	· · · · · · · · · · · · · · · · · · ·
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	<b>.</b>
Special Instructions to Filing Officer:	
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Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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## **COVER LETTER**

Division of Corporation	ons						
·SUBJECT:	U.S. SOLD	> EXG	hange	· In	JC.		
	(Name of corpo	oration - must	include suffix	<b>(</b> )			_
Dear Sir or Madam:							
The enclosed "Application by "Certificate of Existence," and transact business in Florida.	Foreign Corporation I check are submitted	n for Authoriz I to register th	ation to Trans ne above refer	sact Busine enced fore	ess in Flo eign corp	orida," oration	to
Please return all corresponden	ce concerning this m	atter to the fo	llowing:				
	Christoph	nea PA	mLick				
	(Nar	ne of Person)		<u> </u>		.,,	
U	Christoph (Nan .S. GOLD (Fim	EXCha	mge,	INC	•		
-, ii - 1	(Firm	n/Company)	,	. بلا			<del></del>
	III BRIG	ckell	Ave	44- ( 	100		<del></del>
*	viami,	Address)	3313	5 1	₽		
	(City/S	tate and Zip o	code)		LCC	388	<del></del>
For further information concer					RETARY OF	SEP 24	ED
C'heistopher Pau	Lick at (7"	75 , 20	15-00L	<u> ५</u>	FL S	<b>→</b>	D
(Name of Person)	(A	area Code & I	Daytime Telep	hone Nun	DA CONTRACTOR	<b>8:</b> 32	
STREET/COURIER New Filing Section Division of Corporatio Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ons er Circle		MAILING New Filing S Division of 6 P.O. Box 63 Tallahassee,	Section Corporation 27	ons		
Enclosed is a check for the fol	lowing amount:						
<del></del>	78.75 Filing Fee & Certificate of Status	\$78.75 Certifie	Filing Fee & ed Copy	$\Gamma$ c	7.50 Filin ertificate ertified C	of State	us &



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

June 24, 2008

CHRISTOPHER PAULICK 1111 BRICKELL AVE 1100 MIAMI, FL 33131

SUBJECT: U.S. GOLD EXCHANGE, INC.

Ref. Number: W08000030448

We have received your document for U.S. GOLD EXCHANGE, INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

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.

If you have any questions concerning the filing of your document, please call (850).245-6955.

Suzanne Hawkes Regulatory Specialist II

Letter Number: 708A00038132

## 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. U.S. GOLD EXCHANGE FUC.  (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
NA
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. (State or country under the law of which it is incorporated)  (FEI number, if applicable)
· 1
4. (Date of incorporation)  5. Perpetua ( (Duration: Year corp. will cease to exist or "perpetual")
6. July - 08
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. IIII BRICKELL Ave #1100 (Principal office address)
M) Man: El 33131
(Current mailing address)
MIAMI FL. 33131  2710 thomes Ave \$200 cheyenne. WY 82001
8. GOLD PRODUCT SALES
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florids (C)
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: CHRISTOPHER PAULICK  Name: CHRISTOPHER P
Office Address: IIII BRICKELL Ave # 1100 FOR A TO THE STATE OF THE STA
miami FL Florida 33131 88 99
(City) (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.
( ylos farden
(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.

12. Names and business addresses of officers and/or directors:			
A. DIRECTORS			
Chairman:			
Address:			
Vice Chairman:			
Address:	·		
Director: Chrustopher Paulick			
Address: C/OUS. GOLD EXCHANGE INC			
2710 thomas Ave #800			
Director: Critasiquesc France  Address: Clous. Gold Exchange Inc  2710 thomas Ave \$200  Director: Chayene WY 82001			
Address:			<del> </del>
·			
B. OFFICERS	IAI IS	71	
President: Christophere Paulick	.LAF	7008 SEP	77
President: Chrysophere Paulick  Address: Stre	TAR	₽ 2	
	Y OF		m
Vice President: Christophen Paulick	307. V1S	8.	O
Vice President: Christophen Paulick  Address: Same	NOTE TEA	3 <b>2</b>	
Secretary: Chrysophen Paulide			
Address: Street			
Treasurer:			,
Address:			
^ ^			
NOTE: If necessary you may attach an addendum to the application listing additional officers	ınd/or di	rectors.	
(Signature of Director or Officer listed in number 12 of the application)			
14. Christophen Paulicle			
(Typed or printed name and capacity of person signing application)			

## STATE OF WYOMING Office of the Secretary of State

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

U.S. Gold Exchange, Inc.

is a

### **Profit Corporation**

formed or qualified under the laws of Wyoming did on **November 8, 2007**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2007-000545796**.

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 18th day of September, 2008 at 11:28 AM. This certificate is assigned 003798327.



May Secretary of State Secretary of State ALLAHASSEE, FLORID