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(Requestor's Name)

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(City/State/Zip/Phone #)

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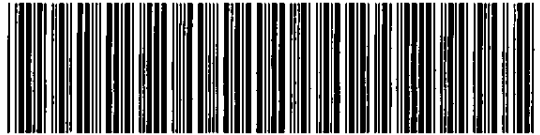
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

208-45758

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Executive Management, 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:

Michael Vilner

(Name of Person)

Executive Management, Inc.

(Firm/Company)

18911 Collins Ave. apt. 606

(Address)

Sunny Isles Beach, FL 33160

(City/State and Zip code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Michael Vilner

(Name of Person)

at (954) 554-2270

(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



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08 OCT 17 AM 8 09

FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 3, 2008

MICHAEL VILNER
EXECUTIVE MANAGEMENT, INC.
18911 COLLINS AVE, APT 606
SUNNY ISLES BEACH, FL 33160

SUBJECT: EXECUTIVE MANAGEMENT, INC.
Ref. Number: W08000045758

We have received your document for EXECUTIVE MANAGEMENT, 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.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap
Regulatory Specialist II

Letter Number: 708A00052537

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. **Executive Management, Inc.**

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

Executive Management of Montana, Inc.

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

2. **Montana**

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

3. **80-0268359**

(FEI number, if applicable)

4. **September 3, 1999**

(Date of incorporation)

5. **Perpetual**

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

6. _____

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

7. **1193 Willow Creek Rd., Corvallis, MT 59828**

(Principal office address)

18911 Collins Ave. apt. 606, Sunny Isles Beach, FL 33160

(Current mailing address)

8. **Accommodation and transportation services.**

(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: **Michael Vilner**

Office Address: **18911 Collins Ave. apt. 606**

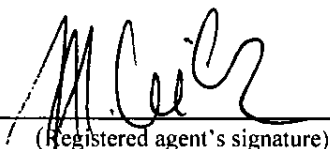
Sunny Isles Beach, Florida **33160**

(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.


(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

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

A. DIRECTORS

Chairman: Michael Vilner

Address: 18911 Collins Ave. apt. 606, Sunny Isles Beach, FL 33160

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Michael Vilner

Address: 18911 Collins Ave. apt. 606, Sunny Isles Beach, FL 33160

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. Michael Vilner, President.

(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
STATE OF MONTANA
CERTIFICATE OF FACT

I, **BRAD JOHNSON**, Secretary of State of the State of Montana, do hereby certify that on **SEPTEMBER 3, 1999, EXECUTIVE MANAGEMENT, INC.** was incorporated under the laws of the State of Montana and received its Certificate of Incorporation for a term of perpetual duration.

I further certify that the last corporate annual report filed by the corporation was the **2008** report filed in this office on **AUGUST 19, 2008**.

I further certify that the registered agent for the corporation as listed on the 2008 annual report is **MOUNTAIN STATES CONSULTING INC; 1193 WILLOW CR RD; CORVALLIS; MT, 59828**.

I further certify that the officers and directors of the corporation as listed on the **2008** annual report are: **MICHAEL VILNER (PRESIDENT, DIRECTOR); 18911 COLLINS AVE APT 606; SUNNY ISLES BEACH; FL, 33160-238; BRAD BURGESS (TREASURER); PO BOX 6; HAMILTON; MT, 59840**.

I further certify that the corporation has filed all required reports with this office and that no notice or decree of dissolution has been filed with this office and in good standing.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Montana, at Helena, the Capital, this **September 15, 2008**.



BRAD JOHNSON
Secretary of State

Certified File Number: **D100394**

SECRETARY OF STATE
HELENA, MONTANA

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