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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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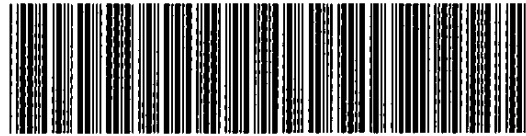
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VH

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Eyes of God, 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:

ANTHONY VITALE
(Name of Person)

EYES OF GOD, INC.
(Firm/Company)

1900 SOUTH HARBOR CITY BLVD, SUITE 328
(Address)

MELBOURNE, FL 32901
(City/State and Zip code)

For further information concerning this matter, please call:

ANTHONY VITALE at (321) 308-0328
(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

**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. EYES OF GOD, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. n/a
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
3. NEVADA
(State or country under the law of which it is incorporated)
4. 71-1046380
(FEI number, if applicable)
5. 12/21/2007
(Date of incorporation)
6. perpetual
(Duration: Year corp. will cease to exist or "perpetual")
7. n/a
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
8. 1900 SOUTH HARBOR CITY BLVD, SUITE 328
MELBOURNE, FL 32961
(Principal office address)
9. (same)
(Current mailing address)
10. Any and all lawful business
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
11. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: KAIN AND VALINSKY, P.A.
- Office Address: 750 SE 3rd AVE, SUITE 100
FORT LAUDERDALE, Florida 33316-1153
(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
designated in this application, I hereby accept the appointment as registered agent and agree to act in this
further agree to comply with the provisions of all statutes relative to the proper and complete performance
and I am familiar with and accept the obligations of my position as registered agent.*

Michelle Karmish Kain, President, Kain &
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this a
the Department of State, by the Secretary of State or other official having custody of corporate records in the
under the law of which it is incorporated.

SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: ANTHONY VITALE

Address: 1900 SOUTH HARBOR CITY BLVD, SUITE 328
MELBOURNE, FL 32901

Vice Chairman: n/a

Address: _____

Director: n/a

Address: _____

Director: n/a

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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B. OFFICERS

President: ANTHONY VITALE

Address: (same)

Vice President: n/a

Address: _____

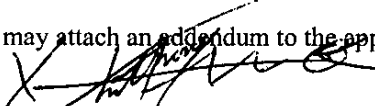
Secretary: ANTHONY VITALE

Address: (same)

Treasurer: ANTHONY VITALE

Address: (same)

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. ANTHONY VITALE, PRESIDENT AND CEO
(Typed or printed name and capacity of person signing application)

SECRETARY OF STATE

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AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



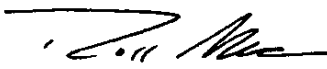
CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **EYES OF GOD, INC**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 21, 2007, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on January 20, 2009.




ROSS MILLER
Secretary of State

Electronic Certificate
Certificate Number: C20090120-1748
You may verify this electronic certificate
online at <http://www.nvsos.gov/>