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TALLAHASSEE, FLORIDA

MRS  
2/17

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Well Being Resources 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:

PATRICIA W ANDERSON  
(Name of Person)

Well Being Resources Inc.  
(Firm/Company)

3001 SW Third Avenue Bay 3  
(Address)

Ft. Lauderdale FL 33315  
(City/State and Zip code)

For further information concerning this matter, please call: 954-522-2267

PAT ANDERSON  
(Name of Person)

THAB UHAR- NELSON  
at ( 713 ) 244-8978  
(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

February 3, 2009

PATRICIA W ANDERSON  
WELL BEING RESOURCES INC.  
3001 SW THIRD AVENUE, BAY 3  
FT LAUDERDALE, FL 33315

SUBJECT: WELL BEING RESOURCES INC.  
Ref. Number: W09000005301

We have received your document for WELL BEING RESOURCES 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 document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

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.

We need a current certificate of status for your corporation from Delaware. Remove the date that you have on line number seven of your form.

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

Ruby Dunlap  
Regulatory Specialist II

Letter Number: 009A00003893

RECEIVED  
DEPARTMENT OF STATE  
09 FEB 16 PM 12:24

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

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

2. DELAWARE 3. 26-2851742  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. July 24, 2008 5. Perpetual  
(Date of incorporation) (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. \_\_\_\_\_  
(Principal office address)

3001 SW Third Avenue, Bay 3 Ft. Lauderdale FL 33315  
(Current mailing address)

8. Leasing Print-d-use water purification units to offices  
(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: Patricia W Anderson

Office Address: 900 SE Second St, #202  
Fort Lauderdale, Florida 33301  
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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.*

Patricia W Anderson

(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: Same as Officer

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS

~~CEO~~  
President: Pat Anderson

Address: ~~1014 Marion Ave Rd SW~~ 3001 SW Third Ave #3  
~~Leesburg VA 20175~~ Ft Lauderdale FL 33315

~~Vice President:~~ THOMAS M. ANDERSON

Address: 1201 SE 6<sup>th</sup> St  
Ft Lauderdale FL 33301

~~Secretary:~~ IVAR H. CARLMA

Address: 1201 SE Sixth St. Ft Lauderdale FL 33310

~~Treasurer:~~ Pat Anderson

Address: \_\_\_\_\_

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

13. Patricia W Anderson  
(Signature of Director or Officer listed in number 12 of the application) Pat

14. PATRICIA W ANDERSON, Pres. & CEO  
(Typed or printed name and capacity of person signing application)

# Delaware

PAGE 1

*The First State*

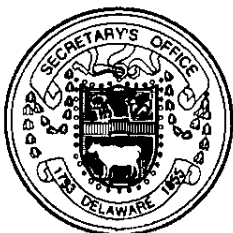
I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WELL BEING RESOURCES INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF OCTOBER, A.D. 2008.

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09 FEB 16 PM 4:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4581304 8300

081064251

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6931813

DATE: 10-24-08