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Florida Department of State
Division of Corporations
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Account Number : FCA000000023
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FOREIGN PROFIT/NONPROFIT CORPORATION

MGE Enterprises Corporation /d/b/a My Gold Envelope, Inc

Certificate of Status	0
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2009 APR 10 A 11:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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APR 13 2009
D. A. WHITE

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. MGE Enterprises Corporation

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

My Gold Envelope, Inc.

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

2. Wyoming 3. 26-4586238 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 4/1/09 5. Perpetual (Date of incorporation) (Duration: Year corp. will cease to exist or Perpetual)

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

7. 330 S.W. 2nd Street, Suite 209, Fort Lauderdale, FL 33312 (Principal office address)

330 S.W. 2nd Street, Suite 209, Fort Lauderdale, FL 33312 (Current mailing address)

8. To engage in any and all lawful business permitted under the laws of the U.S. and the State of Florida. (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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324 (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.

By: Barbara A. Burke (Registered agent's signature) C T Corporation System Barbara A. Burke Special Assistant Secretary

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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Mike Moran
Address: 330 S.W. 2nd Street, Suite 209, Fort Lauderdale, FL 33312

Vice Chairman: _____

Address: _____

Director: Doug Feirstein
Address: 330 S.W. 2nd Street, Suite 209, Fort Lauderdale, FL 33312

Director: Todd Oretsky
Address: 330 S.W. 2nd Street, Suite 209, Fort Lauderdale, FL 33312

B. OFFICERS

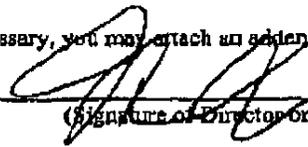
President: Mike Moran
Address: 330 S.W. 2nd Street, Suite 209, Fort Lauderdale, FL 33312

Vice President: Todd Oretsky
Address: 330 S.W. 2nd Street, Suite 209, Fort Lauderdale, FL 33312

Secretary: Doug Feirstein
Address: 330 S.W. 2nd Street, Suite 209, Fort Lauderdale, FL 33312

Treasurer: Doug Feirstein
Address: 330 S.W. 2nd Street, Suite 209, Fort Lauderdale, FL 33312

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**RESOLUTION OF THE BOARD OF DIRECTORS TO ADOPT AN
ALTERNATE NAME FOR USE IN FLORIDA**

(Pursuant to section 607.1506 or 617.1506, F.S.)

(Please print or type)

I, the undersigned Mike Moran, do hereby certify
(Name)

that this Resolution of the Board of Directors of MGE Enterprises Corporation

(Name of Corporation)

a corporation duly organized and existing under the laws of Wyoming
(State or Country)

was adopted on April 7, 2009, adopting the alternate

name of My Gold Envelope, Inc.
(Alternate Name) NOTE: Must contain a corporate suffix)

for use in Florida as its real name is unavailable in Florida.

Date: 4/9/2009
[Signature]
Signature of Chairman, Vice Chairman of the Board, a
director or any officer

President
Title of person signing

FILING FEE \$35

(No fee required if submitted with a foreign not for profit qualification or amendment)

Make checks payable to Florida Department of State and mail to:

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

CR2E126 (6/08)

STATE OF WYOMING
Office of the Secretary of State

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

MGE Enterprises Corporation
is a
Profit Corporation

formed or qualified under the laws of Wyoming did on **April 1, 2009**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2009-000567804**.

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 10th day of April, 2009 at 8:11 AM. This certificate is assigned 005089830.



Max Maxfield
Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website <http://wyoblz.wy.gov> and following the instructions displayed under Validate Certificate.