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(Requestor's Name)		
(Address)		
(Address)		
(City/State	e/Zip/Phone #)	
PICK-UP	WAIT MAIL	
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(Document Number)		
Certified Copies	Certificates of Status	
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T. Burch APR 21 2009

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: CIA WHEEL GROUP, 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:
JENNI KIM
(Name of Person)
CIA WHEEL GROUP
(Firm/Company)
18400 E GALE AVE
(Address)
CITY OF INDUSTRY, CA 91748 (City/State and Zip code)
(City/State and Zip code)
For further information concerning this matter, please call:
MARIA PEREZ at (626) 636-1660
(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 \$\sum \text{\$78.75 Filing Fee & S78.75 Filing Fee & Certificate of Status}\$\$ Certified Copy \$\$ Certificate of Status & Certified Copy

FILED 2009 APR 20 PM 4: 46 GLG TSA OF STATE TALLARY SET, FLORIDA

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.

•		e adopted for the purpose of transacting business in Florida)
California		02-0625197
·-	under the law of which it is incorporated)	(FEI number, if applicable)
08/20/199		perpetual
	of incorporation)	(Duration: Year corp. will oease to exist or "perpetual")
01/01/200		
		in Floride, if prior to registration) 1502, P.S., to determine penalty liability)
7658 Philli	ps Highway, Suite 1100	
·	(Principal office ad	dress)
Jacksonvil	le, FL 32256	
	- (Current mailing ad	(dress)
. Mihalaasis		ina ta vatali ataraa
	auto wheels and accessoric auto wheels and accessoric automorphism authorized in home state or o	
, , , ,	• • • • • • • • • • • • • • • • • • •	
Name and street	et address of Piorida registered agent: (P.	O. Box NOT acceptable)
Name:	Daniel Nicholas	
(vame:	7658 Phillips Highway, Su	ite 1100
		
	Jacksonville,	Elopids 32256
Name: ffice Address:	Jacksonville,	, Florida 32256 (Zip code)
ffice Address: D. Registered at a laying been names ignated in this arther agree to c	(City) gent's acceptance: sed as registered agent and to accept ser- application, I hereby accept the appoint omply with the provisions of all standes with and accept the obligations of my p	vice of process for the above stated corporation at the place tment as registered agent and agree to act in this capacity. relative to the proper and complete performance of my dut nasilion as registered agent.
ffice Address: O. Registered at a laving been names ignated in this arther agree to c	(City) gent's acceptance: sed as registered agent and to accept ser- application, I hereby accept the appoint omply with the provisions of all standes with and accept the obligations of my p	vice of process for the above stated corporation at the place iment as registered agent and agree to act in this capacity. relative to the proper and complete performance of my dut

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

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A. DIRECTORS	GEORGIACN OF STATE TALLAMSSIES FLORIDA
Philip Young	
ddress: 18400 E Gale Ave	
City of Industry CA 91748	·····
ce Chairman:	
ldress:	
rector:	
ldress:	
rector:	
ldress:	
OFFICERS	
esident: Paul Kim	
dress: 18400 E Gale Ave	
City of Industry CA 91748	
ce President:	
ldress:	
_{cretary:} Jenni Kim	
dress: 18400 E Gale Ave, City of Industry	y, CA 91748
easurer:	
dress:	
OTE: If necessary, you may attach an addendum to the ap	oplication listing additional officers and/or directors.
(Signature of Director or Officer listed	d in number 12 of the application)
Jenni Kim (Typed or printed name and capacit	y of person signing application)
(-) prod or printed mante and expuest,	A ne harani ai@iiii@ mbhiiamiia;i)

State of California Secretary of State

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SECRETISEY OF STATE
TALLAUSSEE: FLORIDA

CERTIFICATE OF STATUS

ENTITY NAME:

CIA WHEEL GROUP

FILE NUMBER:

FORMATION DATE:

C1730260 08/20/1993

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of March 12, 2009.

DEBRA BOWENSecretary of State