# 

(Requ	estor's Name)			
(Address)				
(Addre	ess)			
(City/s	State/Zip/Phone	<del>e</del> #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
		·		





09/04/09--01036--023 \*\*350.00

### **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: GOLD INTERNATIONAL	
	ation - must include suffix
Dear Sir or Madam:	
	n for Authorization to Transact Business in Florida," d to register the above referenced foreign corporation to
Please return all correspondence concerning this m	natter to the following:
Luciu	s Smejda
Nam	ne of Person
Internat	ional Center
Firm/	/Company
150 SE 2r	nd Ave. # 1002
F	Address
	, FL. 33131
City/St	ate and Zip code
	nterwy@gmail.com
E-maii address: (to be u	sed for future annual report notification)
For further information concerning this matter, ple	ase call:
Lucius Smejda at ( 78	86 <sub>)</sub> 303-3313
	rea 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 & \$\subseteq \$\$87.50 Filing Fee, Certified Copy  Certified Copy  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. Gold Interna	itional Co.		
	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION	31
(If name unavails	able in Florida, enter alternate corporate name	adopted for the purpose of transacting	business in Florida)
2 Wyoming	•	84-1623382	
	under the law of which it is incorporated)	(FEI number, if appli	cable)
March 20, 20	003	Perpetual	
·	of incorporation)	(Duration: Year corp. will cease to	exist or "perpetual")
		•	
		n Florida, if prior to registration) 502, F.S., to determine penalty liability	y)
2710 Thomes	s Ave., Cheyenne, WY 82001		
	(Principal office add	lress)	
444 Brickell A	Avenue # 51-246, Miami, FL. 3313 <sup>.</sup>	1	
	(Current mailing add	lress)	
		•	
General			
(Purpose(s	) of corporation authorized in home state or c	ountry to be carried out in state of Flor	ida)
. Name and stree	et address of Florida registered agent: (P.0	D. Box NOT acceptable)	96 96
Name:	Exex Inc.		9 SEP -4 PM 12: 03 SECRETARY OF STATE FALLAHASSEE FLORID
	1602 Alton Road # 100		製して
Office Address:	1002 Altor Road # 100		P. C. P. C.
	Miami Beach	, Florida 33139	77.0
	(City)	(Zip code)	8E 8
0. Registered as	gent's acceptance:		10 m
lesignated in this urther agree to c	ed as registered agent and to accept serv application, I hereby accept the appoint omply with the provisions of all statutes i with and accept the obligations of my po	ment as registered agent and agree relative to the proper and complete	to act in this capacity. I
_	W. Killer		
	(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:

# FILED 09 SEP -4 PM 12.

A. DIRECTORS	09 SEP -4 PM 12: 03
Chairman: L Smejda	
Address: 2710 Thomes Ave., Cheyenne, WY 82001	SECRETARY OF STATE TALLAHASSEE FLORIDA
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: L Smejda	
Address: 2710 Thomes Ave., Cheyenne, WY 82001	
Vice President: A. Nuh	
Address: 2710 Thomes Ave., Cheyenne, WY 82001	
Secretary: A. Nuh	
Address: 2710 Thomes Ave., Cheyenne, WY 82001	
Treasurer: L Smejda	
Address: 2710 Thomes Ave., Cheyenne, WY 82001	
NOTE: If necessary, you may attach an addendum to the application li	isting additional officers and/or directors.
13. (Signature of Directors of Office Head in some land	12 -6 de
(Signature of Director or Officer listed in number	r 12 or the application)
14. Alpay Nuh  (Typed or printed name and capacity of person	signing application)

## STATE OF WYOMING Office of the Secretary of State

FILED

09 SEP -4 PM 12: 03

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,

#### Gold International

is a

### **Profit Corporation**

formed or qualified under the laws of Wyoming did on **March 20, 2003**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2003-000447941**.

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 1st day of September, 2009 at 3:36 PM. This certificate is assigned 005941626.



May Massisse 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://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.