

F 0900000 3844

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

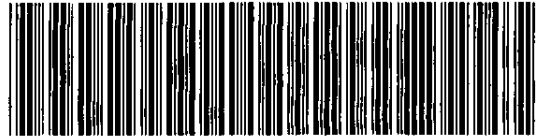
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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J. Shivers SEP 29 2009

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: ANGEL ACQUISITION CORP.
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:

MICHAEL BLOOM

Name of Person

ANGEL FINANCE GROUP

Firm/Company

7777 GLADES ROAD, SUITE 100

Address

BOCA RATON, FL 33434

City/State and Zip code

MICHAEL@ANGELFINANCEGROUP.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GUY M. JEAN-PIERRE

Name of Person

at (561) 305.6767

Area Code & Daytime Telephone Number

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

Angel Finance Group Corp.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NEVADA 3. 06-1588136
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. MARCH 10, 1999 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)

7777 GLADES ROAD SUITE 100, BOCA RATON, FL 33434

(Principal office address)

7. 7777 GLADES ROAD SUITE 100, BOCA RATON, FL 33434
(Current mailing address)

8. ANY AND ALL LAWFUL MATTERS UNDER THE FLORIDA LAW
(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: MICHAEL BLOOM

Office Address: 7777 GLADES ROAD SUITE 100

BOCA RATON, Florida 33434
(City) (Zip code)

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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.

Michael Bloom
(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: STEVE BONENBERGER
Address: 1800 N. CARSON STREET, SUITE 212-3018, CARSON CITY, NV 89701

Vice Chairman: _____
Address: _____

Director: _____
Address: _____

Director: _____
Address: _____

B. OFFICERS

President: STEVE BONENBERGER
Address: 1800 N. CARSON STREET, SUITE 212-3018, CARSON CITY, NV 89701

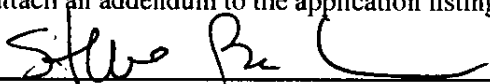
Vice President: _____
Address: _____

Secretary: _____
Address: _____

Treasurer: _____
Address: _____

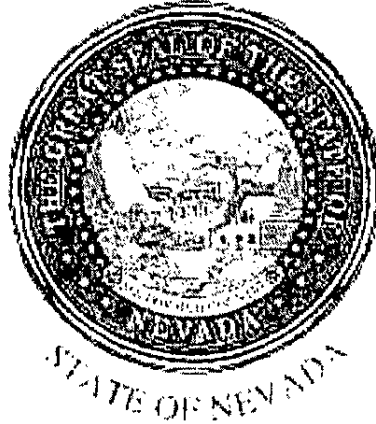
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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. STEVE BONENBERGER, PRESIDENT
(Typed or printed name and capacity of person signing application)

SECRETARY OF STATE



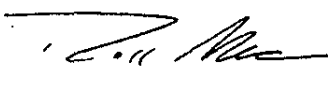
CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

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, **ANGEL ACQUISITION CORP.**, 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 March 10, 1999, 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 August 25, 2009.




ROSS MILLER
Secretary of State

Electronic Certificate
Certificate Number: C20090825-1434
You may verify this electronic certificate
online at <http://www.nvsos.gov/>

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TALLAHASSEE, FLORIDA

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