F09000004627

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
NATION + 5 DATE 1/27609 DOC. EXAM 5		

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SEGRETARY OF STATE

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TO: New Filing Section Division of Corporations	DEPARTMENT OF STATE CIVISION OF CORPORATIONS CORPORATIONS
SUBJECT: Booper Vibos I	
(Name of Corporation - must in	ienuce surrixy
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorizat "Certificate of Existence," and check are submitted to register the transact business in Florida.	
Please return all correspondence concerning this matter to the following	owing:
lathaniel A	-Be110
(Name of Person)	
Beener Vib	es Onc
· (Firm/Company)	`\
422 alexanders ville	d. Mamisbur 044534
(Address)	<u> </u>
Miamisbur	C, OH 45342
(City/State and Zip cod	
For further information concerning this matter, please call:	
(Name of Person) (Name of Person) (Area Code & Day	74-3050 ytime 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 cheek 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

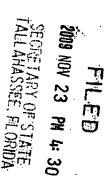
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.
1. CEnter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co." or "Corp.")
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. Date of incorporation) 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. FEBRA QLE KOROLERS Y LE ROLEM FORM S. Durg, OH 4534 3. (Principal office address) 422 alexanders VIII P. D. Miamis burg OH 4534 2. (Current mailing address)
8. Retail Sales: For Profit (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: Rick Loehria
Name: <u>Rick Loehrig</u> Office Address: <u>284 US Bypass 41</u> South
Venico, Florida 34285 (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 um familiar with and accept the obligations of my position as registered agent. 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:	
Address:	
	ASS COL
Vice Chairman:	NOV ETAL HAS
Address:	23 SEE, OF
	ST.
Director:	# 30 DA
Address:	
7 (4.0) (5.5)	
Divactor	**************************************
Director:	
Address:	
B. OFFICERS	
President: Derric	
Address: 613 Venice ade	
Venice, Florida 34285	
Vice President: Nathaniel A Belvo	
Address: 1539 Heritage Lake Dr	
Centerville OH 45458	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officers	s and/or directors.
13. Natar Relaz	
(Signature of Director or Officer listed in number 12 of the application)	
14. <u>Nathaniel</u> A Belva	Vice printo
(Typed or printed name and capacity of person signing application)	•

United States of America State of Ohio Office of the Secretary of State

I, Jennifer Brunner, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show BEEPER VIBES, INC., an Ohio corporation, Charter No. 966193, having its principal location in Dayton, County of Montgomery, was incorporated on January 13, 1997 and is currently in GOOD STANDING upon the records of this office.





Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 24th day of November, A.D. 2009

Ohio Secretary of State

Validation Number: V2009328N428B3