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Special Instructions to Filing Officer:			



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2010 JAN 13 PN 4: 34 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Filing Section Division of Corporations
SUBJECT: M&L Ventures, Inc. MCL Ventures USA, Inc. (Name of Foreign Corporation)
Dear Sir or Madam:
The enclosed Foreign Name Registration, certificate and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Raven LeBray (Name of Person)
Boughton Law Corp (Firm/Company)
1313 E Maple ST #201 PMB 525 (Address) (Address)
Bellingham WA 98225 (604) 867 -531
1313 E Maple ST #201 PMB 525 (Address) Bellingham WA 98225 (City/State and Zip Code) For further information concerning this matter, please call:
Raven LeBray at (360) 746-8334
(Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 Exclosed is a check for the following arount:
Enclosed is a check for the following amount:

☑ \$96.25 Filing Fee & Certified Copy

□ \$87.50 Filing Fee

APPLICA		FION FOR AUTHORIZATION TO TRANSACT S IN FLORIDA
IN COMPLIANCE REGISTER A FOR	T WITH SECTION 607.1503, FLORIDA S REIGN CORPORATION TO TRANSACT	STATUTES, THE FOLLOWING IS SUBMITTED TO BUSINESS IN THE STATE OF FLORIDA.
1M & L Ventu	res, Inc. W.S.C. Uen proporation; must include "INCORPORATED	Tured USA, The.
	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	O," "COMPANY," "CORPORATION,"
(If name unavails	ble in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida
2. Washington	3	71-1048806
	inder the law of which it is incorporated)	(FEI number, if applicable)
4. April 7, 2008	5.	perpetual
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6	Control of the second s	
	(SEE SECTIONS 607.1501 & 607.15	n Florida, if prior to registration) 502, F.S., to determine penalty liability)
7 #210, 15205 C	Collier Blvd Naples, Florida 34	1119-683.3
,,	(Principal office add	
Shre		
	(Current mailing add	ress)
8. Equipment ar	of corporation authorized in home state or co	unter to be asserted out in state of Florida
• • • • • • • • • • • • • • • • • • • •	•	•
9. Name and <u>street</u>	address of Florida registered agent: (P.O	Box NOT acceptable)
Name:	Agents and Corporations,	Inc.
Office Address:	300 Fifth Avenue South.	<u>Sui</u> te 101-330
	Naples	Florida 34102
•	(City)	, Florida 34102 (Zip code)
lesignated in this a jurther agree to con	as registered agent and to accept service optication, I hereby accept the appointments with the provisions of all statutes retith and accept the obligations of my position of the control	ee of process for the above stated corporation at the place ent as registered agent and agree to act in this capacity. I lative to the proper and complete performance of my duties, ition as registered agent. To c.
	(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: IVan Lauzon .		<u>~~~</u>
Address: 9645 Cobalt Cove Circle		
Na ptes, FL 34120		NAC
Vice Chairman: Robert Martin.	<u> </u>	
Address: 2401 Leafine Lane		-P
Naples FL 34119		_ [.
Director: Renée martin	DE L	_ _3
Address: 2401 hafshine Lan		_
Naples FL 34119	·	
Director:		
Address:		
B. OFFICERS		
President: Ivan Lauzon L		
Address: 9645 Cobart Cove Circle		-
•		-
Naples FL 34120		-
Vice President: Robert martin		-
Address: 2401 heafshine fane		-
Naples FL 34119		-
Secretary: Konnie Lauson		-
Address: 9645 Cobalt Cove Circle, Naples FL 34120		-
Freasurer: Revée Martin	· 	_
Address: 2401 Reakhine Lane Naples FL 34119		_
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	,	
3. Clarrada		
(Signature of Director or Officer listed in number 12 of the application)		
4. Kenee Martin, Director (Typed or printed name and capacity of person signing application)		

11/1/20

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Secretary of State

I, SAM REED, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION

OF

M & L VENTURES USA, INC.

I FURTHER CERTIFY that the records on file in this office show that the above named Profit Corporation was formed under the laws of the State of WA and was issued a Certificate Of Incorporation in Washington on 4/7/2008.

I FURTHER CERTIFY that as of the date of this certificate, M & L VENTURES USA, INC. remains active and has complied with the filing requirements of this office.

Date: January 13, 2010

UBI: 602-821-029



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Sam Reed, Secretary of State