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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO:	New Filing Sec Division of Cor	tion	(
SHRJ	DECT∙ K. E. Smi	th Financial Group, Inc.		
5000	EC1.		ion - must include suffix	
Dear S	Sir or Madam:			
"Certi	ficate of Existence	ion by Foreign Corporation to e," or "Certificate of Good Son corporation to transact bus	tanding" and check are sub-	et Business in Florida," mitted to register the
Please	return all corresp	ondence concerning this ma	tter to the following:	
Angel	a E. Smith			
		Name	of Person	
K. E.	Smith Tax Adviso	ry Group, Inc.		
		Firm/C	Company	
3220	SW 31st Road, S	uite 202		
		Ac	ldress	
Ocala	, FL 34474			
		City/Stat	e and Zip code	
angel	aep@aol.com			
		E-mail address: (to be use	ed for future annual report n	otification)
For fu	rther information	concerning this matter, pleas	se call:	,
Angela	a E. Smith	_{ät (} 813) 493-8004	
	Name of Perso		ea Code & Daytime Telepho	one Number
Enclos	New Filing Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations g Center Circle	MAILING AN New Filing Se Division of Co P.O. Box 6327 Tallahassee, F	ction orporations
☑ \$7	0.00 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.

K. E. Smith Fir	ancial Group, Inc.			
(Enter name of countries," "Co.," "Co.," "Co.,"	orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"	_
(If name unavail	able in Florida, enter alternate corporate na	ame	adopted for the purpose of transacting business in Florid	<u>a)</u>
North Carolina		3.	56-206684	
(State or country	under the law of which it is incorporated)	-	(FEI number, if applicable)	_
, 1/1/98		5.	•	
(Date	of incorporation)		(Duration: Year corp. will cease to exist or "perpetual"	")
Mo bu	siness has been tr	an	sacted.	
	(Date first transacted busine	ess ir	n Florida, if prior to registration) 502, F.S., to determine penalty liability)	_
0000 0141 04 - 4 5		,,,,,	502, r.s., to determine penanty habitity)	
. 3220 SVV 31st F	Road, Suite 202, Ocala, FL 34474 (Principal office	odd	raco)	
V E Souith Fin	•	auui	·	<u>></u> _
K. E. Smith Fin	ancial Group, Inc. (Current mailing	add	rece)	3
	(Caron maning	, auu	ST.	
			\mathfrak{Q}	=
Moving busine	ss to Florida			- P
·		or co	ountry to be carried out in state of Florida)	말
(Purpose(s	e) of corporation authorized in home state of		puntry to be carried out in state of Florida)	
(Purpose(s	et address of Florida registered agent:		Duntry to be carried out in state of Florida) Description: Description	
(Purpose(s	e) of corporation authorized in home state of		Duntry to be carried out in state of Florida) Description Descriptio	FRIG. II
(Purpose(s	et address of Florida registered agent:		Duntry to be carried out in state of Florida) OCT DEST DE	L PHI3: LI
(Purpose(s) O. Name and street Name:	ct address of Florida registered agent: Kenneth E. Smith, III		Duntry to be carried out in state of Florida) D. Box NOT acceptable)	PH 3: 1

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.

(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:



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Chairman	none 10 JAN 14 PM 3: 11
Address:	SECRETARY OF STATE TALLAHASSEE, FLORIDA
Vice Chai	rman:
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFI	CERS
President:	Kenneth E. Smith, III
Address:	3220 SW 31st Road, Suite 202
	Ocala, FL 34474
Vice Presi	dent: Kenneth E. Smith, III
Address:	
	same
Secretary:	Angela E. Smith
Address:	
	Angela E. Smith
Address:	
	If necessary, you may attach an addendum to the application listing additional officers and/or directors.
	(Signature of Director or Officer listed in number 12 of the application)
_{14.} Ken	neth E. Smith, III - President/Vice-President
	(Typed or printed name and capacity of person signing application)



NORTH CAROLINA Department of The Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

K.E. SMITH FINANCIAL GROUP, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 26th day of January, 1998, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



IN WITNESS WHEREOF, I have here my hand and affixed my official seal at the City of Raleigh, this 13th day of January, 2010.

Elaine I Marshall

Secretary of State