

To: Fla Dept of State
Subject: 001495.117901.1

Division of Corporations

To: John Weidman@ch

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : CORPDIRECT AGENTS, INC.
Account Number : 110450000714
Phone : (850) 222-1173
Fax Number : (850) 224-1640

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please****

Email Address: _____

**FOREIGN PROFIT/NONPROFIT CORPORATION
SAVYMAY, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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**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. SAVYMAY, INC.

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

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. California

(State or country under the law of which it is incorporated)

3. 26-3518735

(FBI number, if applicable)

4. 9/4/2008

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. upon filing

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 16450 Bake Parkway, Suite 100, Irvine, CA 92618

(Principal office address)

16450 Bake Parkway, Suite 100, Irvine, CA 92618

(Current mailing address)

8. To operate a travel agency

(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: **Crystal Green**

Office Address: **299 Camino Gardens Blvd, Suite 200**

Boca Raton

(City)

Florida 33432

(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 am familiar with and accept the obligations of my position as registered agent.

By: Crystal Green

(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.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Craig G. Carter

Address: 53 Conocido, San Clemente, CA 92673

Vice Chairman: _____

Address: _____

Director: Victoria Ann Kramer

Address: 4220 Via Nivel, Palo Verdes Estates, CA 90274

Director: Rivka Siegel

Address: 2106 N Victoria Drive, Santa Ana, CA 92706

B. OFFICERS

President: Craig G. Carter

Address: 53 Conocido, San Clemente, CA 92673

Vice President: _____

Address: _____

Secretary: Victoria Ann Kramer

Address: 4220 Via Nivel, Palo Verdes Estates, CA 90274

Treasurer: _____

Address: _____

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. Craig G. Carter, President

(Typed or printed name and capacity of person signing application)

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10 JAN 19 PM 3:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**State of California
Secretary of State**

CERTIFICATE OF STATUS

ENTITY NAME:

SAVIMAY, INC.

FILE NUMBER: C3160577
FORMATION DATE: 09/04/2008
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, DEBRA BOWEN, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of January 15, 2010.

Debra Bowen

DEBRA BOWEN
Secretary of State