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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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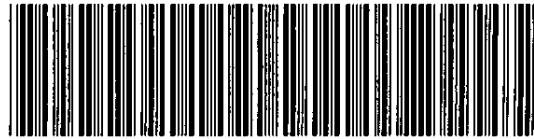
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: BEACHCASH INC

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," or "Certificate of Good Standing" 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:

MAITRE LORA CIANCI

Name of Person

KAUFMAN LARAMEE LLP

Firm/Company

800 RENE LEVESQUE WEST, SUITE 2220

Address

MONTREAL, QUEBEC, H3B 1X9

City/State and Zip code

lcianci@kaufmanlaramee.com

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

For further information concerning this matter, please call:

LORA CIANCI

Name of Person

at (514) 871-5319

Area Code & Daytime 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

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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. BEACHCASH INC

(Enter 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. CANADA

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

3. _____

(FEI number, if applicable)

4. AUGUST, 17, 2006

(Date of incorporation)

5. PERPETUAL

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

6. 5906 BEETHOVEN AVE, COTE ST-LUC, QUEBEC, H4W 3B6, CANADA

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

7. 5906 BEETHOVEN AVE, COTE ST-LUC, QUEBEC, H4W 3B6, CANADA

(Principal office address)

800 RENE-LEVESQUE WEST, SUITE 2220, MONTREAL, QUEBEC, H3B 1X9, CANADA

(Current mailing address)

8. ANY AND ALL LAWFUL BUSINESS

(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: PERLMAN, YEVOLI & ALBRIGHT

Office Address: 200 SOUTH ANDREWS AVENUE, SUITE 600

FORT LAUDERDALE

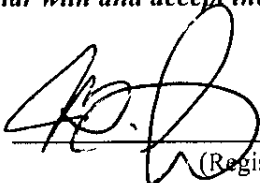
(City)

, Florida 33301

(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.



(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

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Chairman: _____

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Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: JARED LANGLEBEN

Address: 6803 ABRAHAM DE SOLA, #501, MONTREAL, QUEBEC, H3X 4B3, CANADA

Vice President: ABBAS VISRAM

Address: 8065 SARTRE, BROSSARD, QUEBEC, J4X 1P1, CANADA

8065 SARTRE, BROSSARD, QUEBEC, J4X 1P1, CANADA

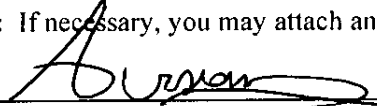
Secretary: _____

Address: _____

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. ABBAS VISRAM, VICE PRESIDENT

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



Industry Canada

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**Certificate
of Incorporation**

**Canada Business
Corporations Act**

**Certificat
de constitution**

**Loi canadienne sur
les sociétés par actions**

BEACHCASH INC.

438043-6

Name of corporation-Dénomination de la société

Corporation number-Numéro de la société

I hereby certify that the above-named corporation, the articles of incorporation of which are attached, was incorporated under the *Canada Business Corporations Act*.

Je certifie que la société susmentionnée, dont les statuts constitutifs sont joints, a été constituée en société en vertu de la *Loi canadienne sur les sociétés par actions*.

Richard G. Shaw
Director - Directeur

August 17, 2006 / le 17 août 2006

Date of Incorporation - Date de constitution

Canada

Certified true copy of the original
witnessed before Laurent Benhaim, notary public
for and in the Province of Quebec on
January 15, 2010.

(B1816)