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PICK-UP	WAIT	MAIL			
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Certified Copies	_ Certificate	s of Status			
Special Instructions to Filing Officer:					

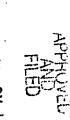
Office Use Only



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SECRETARY OF STATE





COVER LETTER

TO: New Filing Section	
Division of Corporations	
SUBJECT: BDB Fireworks, Inc.	
Name of corpo	oration - must include suffix
Dear Sir or Madam:	
	on for Authorization to Transact Business in Florida," d Standing" and check are submitted to register the business in Florida.
Please return all correspondence concerning this	matter to the following:
Wendy Machen	
Na	me of Person
BDB Fireworks, Inc.	
Firr	n/Company
1672 SE Pleasantview Street	
	Address
Port St. Lucie, FL 34983	
City/S	State and Zip code
cocoplum171@yahoo.com	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, pl	lease call:
Wendy Machen at (77)	2) 971-4018
	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
Enclosed is a check for the following amount:	
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status	

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.	BDB Fireworks, Inc.					
		corporation; must include "INCORPORAT Corp," "Inc," "Co," or "Corp.")	ΈD	" "COMPANY," "CORPORATION,"		_
	N/A					
	(If name unavail	able in Florida, enter alternate corporate n	ame	adopted for the purpose of transacting business	in Florida))
2.	South Carolina	a	3.	27-2388573		
	(State or country	under the law of which it is incorporated)		(FEI number, if applicable)		_
4.	10-28-2009		5.	Perpetual		
		e of incorporation)		(Duration: Year corp. will cease to exist or "p	erpetual")	_
6.	N/A					
		•		n Florida, if prior to registration) 502, F.S., to determine penalty liability)	≥ 8	_
7.	3212 S. US Hw	y 1 Suite 1, Fort Pierce, FL 34952			圣器	AVH OI
(Principal office address)						
8.	Fireworks sales	s				1:24
	(Purpose(s	s) of corporation authorized in home state	or c	ountry to be carried out in state of Florida)		
9.	Name and stree	et address of Florida registered agent:	(P.C	D. Box NOT acceptable)		
	Name:	Robert F. Machen				
Οſ	ffice Address:	1672 SE Pleasantview Street				
		Port St. Lucie		, Florida 34983		
		(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 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.



10 MAY 14 PM 1: 24

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

A. DIRECTORS	10 MAI 14 PM 1: Z4
Chairman: There are no directors	SECRETARY OF STATE
Address:	TALLAHASSEE. FLORIDA
ice Chairman:	
ddress:	
Director:	
Address:	
Director:	
ddress:	
3. OFFICERS	
resident: Jennifer Dietz	
ddress: 178 Cloverleaf Drive	
· · · · · · · · · · · · · · · · · · ·	
ice President: Christopher Dietz	
ddress: 178 Cloverleaf Drive, Longs, SC 29568	
178 Cloverleaf Drive, Longs, SC 29568	
ecretary: Robert F. Machen	
ddress: 1672 SE Pleasantview Street, Port St. Lucie, FL	34983
reasurer: Christopher Dietz	
ddress: 178 Cloverleaf Drive, Longs, SC 29568	
	,
IOTE: If necessary, you may attach an addendum to the application $A = A + A + A + A + A + A + A + A + A + $	on listing additional officers and/or directors.
(Signature of Director or Officer listed in nun	nber 12 of the application)
Robert F. Machen/Secretary	
(Typed or printed name and capacity of per	son signing application)

The State of South Carolina



Office of Secretary of State Mark Hammon

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

BDB FIREWORKS, INC.,

a corporation duly organized under the laws of the State of South Carolina on October 28th, 2009, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the Corporation that it is subject to being dissolved by administrative action pursuant to section 33-14-210 of the South Carolina Code, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 12th day of May, 2010.

Mark Hammond, Secretary of State