

F1000000004640

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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523-637-694-647-2429
W10000044276



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09/20/10--01029--007 **70.00

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10 OCT 21 PM 3:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

END 10/21

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Sayco Capital Group 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:

Christina Inman
Name of Person
Sayco Capital Group Inc.
Firm/Company
507 San Nicolas drive Suite 240
Address
Newport Beach CA 92660
City/State and Zip code
cinman @ Sayco Capital .com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christina Inman at (949) 891-0099
Name of Person 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

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 22, 2010

CHRISTINA INMAN
567 SAN NICOLAS DRIVE
SUITE 240
NEWPORT BEACH, CA 92660

SUBJECT: SAYCO CAPITAL GROUP INC.
Ref. Number: W10000044276

We have received your document for SAYCO CAPITAL GROUP INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's date of incorporation/organization must be listed in the document.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://www.sunbiz.org/titledef.html>.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6921.

Maryanne Dickey
Regulatory Specialist II Supervisor
New Filing Section

Letter Number: 310A00022485

**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:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Sayco Capital Group 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. California

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

3. 27-2496171

(FEI number, if applicable)

4. 5/3/2010

(Date of incorporation)

5. ~~10~~ "Perpetual"

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

6. 9-17-2010

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

7. 567 San Nicolas dr. Suite 240 Newport Beach CA 92660

(Principal office address)

567 San Nicolas dr. Suite 240 Newport Beach CA 92660

(Current mailing address)

8. Real estate activities

(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: Troy Craggiardi

Office Address: 3980 airport Rd. #12 Bldg. A3, Suite 1A

Boca Raton

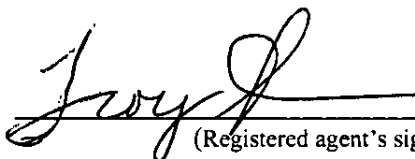
(City)

, Florida 33431

(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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

~~CEO~~ President: Christina M Inman

Address: 567 San Nicolas de Suite 240 Newport Beach CA 92660

Vice President

~~CEO~~ Vice President: Troy Eguiaidi

Address: 3980 Airport Rd. #12 Bldg A3 Suite 1A Joliet IL 61731

Secretary: Christina Inman

Address: ~~567~~ 567 San Nicolas de Suite 240 Newport Beach CA 92660

Treasurer: Christina Inman

Address: ~~567~~ 567 San Nicolas de Suite 240 Newport Beach CA 92660

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. Christina Inman, CEO

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of California
Secretary of State

CERTIFICATE OF STATUS

FILED
10 OCT 21 PM 3:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ENTITY NAME:

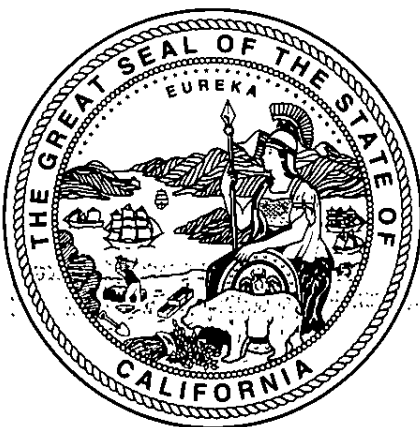
SAYCO CAPITAL GROUP INC.

FILE NUMBER: C3289812
FORMATION DATE: 05/03/2010
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

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 October 01, 2010.

Debra Bowen

DEBRA BOWEN
Secretary of State