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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 : AGENTS AND CORPORATIONS, INC
Account Number : I20010000112
Phone : (302) 575-0875
Fax Number : (302) 575-1642

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

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TALLAHASSEE, FLORIDA
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**FOREIGN PROFIT/NONPROFIT CORPORATION
WELLINGTON INTERNATIONAL AGENCY, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	03
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

**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. WELLINGTON INTERNATIONAL AGENCY, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Int.," "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. 90-0737077

(FEI number, if applicable)

4. 6-13-11

(Date of incorporation)

5. perpetual

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

6. — Upon QUALIFICATION

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

7. 17951 Cowan Avenue #106 Irvine, CA 92614

(Principal office address)

6247 Dartington Way Carlsbad, CA 92009 - will change

(Current mailing address)

8. Agency Representation

(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: **AGENTS AND CORPORATIONS, INC.**

Office Address: **300 FIFTH AVENUE SOUTH, STE 101-330**

NAPLES

(City)

Florida 34102

(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.*

Agents and Corporations, Inc.

By: John H. Williams, V.P.

(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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**SECRETARY OF STATE
TALLAHASSEE FLORIDA**

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

A. DIRECTORS

Chairman: Gilbert Chavez

Address: 17951 Cavan Ave. #106 Irvine CA 92614

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Gilbert Chavez

Address: 17951 Cavan Ave. #106 Irvine CA 92614

Vice President: X

Address: _____

Secretary: 11

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

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Gilbert Chavez - President

(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

ENTITY NAME:

WELLINGTON INTERNATIONAL AGENCY, INC.

FILE NUMBER: C3384958
FORMATION DATE: 06/13/2011
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 July 05, 2011.

Debra Bowen

DEBRA BOWEN
Secretary of State