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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of	Status
Special Instructions to Filing Officer:	

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COVER LETTER

TO: New Filing Section Division of Corporations	1 1	orneral Pautner
SUBJECT: OCO JOUY	+ Inc. (general Paulner coop Pet Prod
Name of corporatibn - n	nust include suffix	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for Aut "Certificate of Existence," or "Certificate of Good Standin above referenced foreign corporation to transact business i	g" and check are submitted to regis	
Please return all correspondence concerning this matter to		
Helena Cocper		
Helena Cocper Name of Per	son	
CocpSport Inc. Firm/Company		
PO BCX 39346		
Address		
Fort Lauderdale, FL	<u> 333'3'4 </u>	
Fort Lauderdale, FL 33339 City/State and Zip code		
heleng @ cocopet-com		
E-mail address: (to be used for	future annual report notification)	Fa P
For further information concerning this matter, please call:		
Helena (OCPEY at (760)	213 7404	on !
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	3
Enclosed is a check for the following amount:		
	Certified Copy	Filing Fee, ate of Status &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOL. REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE ST	
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CO "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	RPORATION,"
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose 3. 49-03	of transacting business in Florida)
	umber, if applicable)
(Date of incorporation) (Duration: Year corp.	will cease to exist or "perpetual")
(Date first transacted business in Florida, if prior to reg (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine p	penalty liability)
7. 4101 Bayusew Drive, Ff Lauderdale † (Principal office address) POBOX 39346 Ft Lauderdale F (Current mailing address)	<u>C 33308</u> C 33339
8. General Paulner of CopPet Products LLP (De (Purpose(s) of corporation authorized in home state or country to be carried out	esign + Licensing of Pet Products in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Helena Coccer	le) SEP
Office Address: 4101 Bayview Duve Fort Lauderdale, Florida 33.	308 E
(City) (Zip 10. Registered agent's acceptance:	23
Having been named as registered agent and to accept service of process for the designated in this application, I hereby accept the appointment as registered age further agree to comply with the provisions of all statutes relative to the proper of and I am familiar with and aggept the obligations of my position as registered ag	ent and agree to act in this capacity. I and complete performance of my duties,
Hallu agei	
(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: 33308 Vice Chairman: Director: Address: Director: Address: _ **B. OFFICERS** Vice President: Address: Secretary: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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.

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



Department of Commerce and Consumer Affairs

CERTIFICATE OF GOOD STANDING

I, the undersigned Director of Commerce and Consumer Affairs of the State of Hawaii, do hereby certify that according to the records of this Department,

COOPSPORT, INC.

was incorporated under the laws of the State of Hawaii on 05/20/1996; and that it is an existing corporation in good standing, and is duly authorized to transact business.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the Department of Commerce and Consumer Affairs, at Honolulu, Hawaii.

Dated: August 29, 2011



Director of Commerce and Consumer Affairs