F11000003682

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





600211787306

09/12/11--01030--002 **78.75

SECRETARY OF STATE





COVER LETTER

TO: New Filing Sec	etion				
Division of Co					
SUBJECT: COCI	KEYE, INC.				
		ation - must include suffix			
Dear Sir or Madam:					
"Certificate of Existence		n for Authorization to Transact Standing" and check are submusiness in Florida.			
Please return all corresp	ondence concerning this m	natter to the following:			
WILLIAM FORS	SYTHE				
	Nam	e of Person			
,	Firm/	Company (Company			
125 MARINER	S DRIVE				
,***	A	Address			
ORMOND BEA	ĊH, FL 32176				
	City/Sta	ate and Zip code			
clarenceyounger					
	E-mail address: (to be u	sed for future annual report no	otification)		
For further information	concerning this matter, plea	ase call:			
	VTUE 000	0 444 0474			
WILLIAM FORSYTHE at (386) 441-8474 Name of Person Area Code & Daytime Telephone Number					
Name of Ferso	п д	trea Code & Daytime Telephol	ne number		
STREET/COURIER ADDRESS: MAILING ADDRESS:					
New Filing Section Division of Corporations		New Filing Section Division of Corporations			
Clifton Building		P.O. Box 6327			
2661 Executive	_	Tallahassee, FL	, 32314		
Tallahassee, FL	<u>,</u> 32301				
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.	Cockeye, 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 na	me	adopted for the purpose of transacting busine	ess in Flori	ida)
2.	CALIFORNIA		3.	C1480861		
	(State or country under	the law of which it is incorporated)		(FEI number, if applicable)		
4.	04/27/1990		5.	PERPETUAL		
	(Date of inc	corporation)		(Duration: Year corp. will cease to exist or	"perpetua	ıl")
6.	NONE	ı				
		•		n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
7.	125 MARINER	S DRIVE, ORMOND BE	Α	CH, FL 32176		
٠.		(Principal office		· · · · · · · · · · · · · · · · · · ·		
125 MARINERS DRIVE, ORMOND BEACH, FL 32176 图						
		(Current mailing	add	ress)	圣出	
8.	ROYALTY AD	MINISTRATION			SSEE O	79
	(Purpose(s) of co	orporation authorized in home state of	rcc	ountry to be carried out in state of Florida)	E FLORII	-
9.	Name and street add	ress of Florida registered agent: (P.C	D. Box NOT acceptable)		: 42
	Name: W	ILLIAM FORSYTHE				
O	ffice Address: 12	5 MARINERS DRIVE				
	OF	RMOND BEACH		, Florida 32176		
		(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.



APPHOYEL AND FILED

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

A. DIRECTORS	14 SEP 12 PM 2: 42
Chairman: WILLIAM FORSYTHE	
Address: 125 MARINERS DRIVE	SECRETARY OF STATE TALLAHASSEE, FLORIDA
ORMOND BEACH, FL 32176	CONIDA
Vice Chairman:	
Address:	
	
Director:	· · · · · · · · · · · · · · · · · · ·
Address:	·
·····	,
Director:	
Address:	
	· · · · · · · · · · · · · · · · · · ·
B. OFFICERS	
President: WILLIAM FORSYTHE	
Address: 125 MARINERS DRIVE	
ORMOND BEACH, FL 32176	
Vice President:	
Address:	
Secretary: WILLIAM FORSYTHE	
Address: 125 MARINERS DRIVE, ORMOND BEACH, FL 3	32176
Treasurer: WILLIAM FORSYTHE	
Address: 125 MARINERS DRIVE, ORMOND BEACH, FL	32176
NOTE: If necessary, you may attach an addendum to the application I	isting additional officers and/or directors.
13. MIMu fait	
Signature of Director or Off	ficer

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. WILLIAM FORSYTHE, President/Chairman

State of California Secretary of State

CERTIFICATE OF STATUS



TI SEP 12 PH 2: 42

SECRETARY OF STATE TALLAHASSEE. FLORIDA

ENTITY NAME:

COCKEYE, INC.

FILE NUMBER:

C1480861

FORMATION DATE:

04/27/1990

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 29, 2011.

DERDA ROWEN

DEBRA BOWEN
Secretary of State