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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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11 SEP 29 PH 1: 24
31VISION OF CORPORATIONS







September 30, 2011

JENNIFER JANSEN VASSILATOS 1040 STAINLEAF STREET HOLLYWOOD, FL 33019

SUBJECT: GUIA INTERNATIONAL CORPORATION

Ref. Number: W11000050547

We have received your document for GUIA INTERNATIONAL CORPORATION, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State.

The fees for profit and nonprofit, domestic or foreign are as follows:

Filings Fees: \$35.00
Registered Agent
Designation \$35.00
Certified Copy \$8.75
Certificate of Status \$8.75

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) 245-6962.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 611A00022579

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Guia International Corporation 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:
Jennifer Jansen Vassilatos Name of Person Guia International Corporation Firm/Company
Name of Person
Guia International Corporation
1040 Satinleaf Street Address
Address
Address Hollywood, FL 33019 City/State and Zip code
City/State and Zip code
guia@ workschedules.com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tennifor Vassilatos at (984) 288-9444 Name of Person Area Code & Daytime Telephone Number
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 & Certified Copy \$87.50 Filing Fee, Certified Copy \$87.50 Filing Fee, Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

			TTES, THE FOLLOWING IS NESS IN THE STATE OF FL		
1. <u>Guia</u> (Enter name of c	Internationa	CORPORATED," "CO	Mation Ompany," "Corporation		
(If name unavail	Kschedules able in Florida, enter alternate	INOY P	boyatca ed for the purpose of transactin	p business in Florida)	
2. Geor	gia	3	58 - 18529	77	
(State or country	under the law of which it is in	corporated)	(FEI number, if appl	icable)	
4. <u>6/14</u>		5	Perpetual		
(Date	of incorporation)	(Du	ration: Year corp. will cease to	exist or "perpetual")	
6	(Data Cart trans	anatad husinaga in Elan	ida ifmuianta nagistratian)		
			ida, if prior to registration) .S., to determine penalty liabilit	y)	
7. 1040	Satinleaf	Street	Hollywood,	FL .33019	
1040	Satinleaf	ncipal office address) Street	Hollywood,	FL 33019	
	(Cur	rent mailing address)			
8. Sof	of corporation authorized in	digital home state or country	Content) to be carried out in state of Flo	rida)	
Name and stree	et address of Florida registe	red agent: (P.O. Bo)	NOT acceptable)		
Name:	<u> </u>	Vassilatos	-	SECH	11 R
Office Address:	1040 Satin	leaf St.		HASSE	7 7
	Hollywood	1	, Florida 3019	in S	
	(City)		(Zip code)	OST IST	20
10 Pagistared or	gent's acceptance:				NO
		to accept service of	process for the above stated	corporation at the p	lace
further agree to c		of all statutes relativ	is registered agent and agree e to the proper and complete as registered agent		
ana i am jamutai	wan una accept the obliga	aions oj my position	us registereu ugent.		
	RIDO				
	(Registered as	gent'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 11 OCT 12 PM 2: 21 Address: SECRETARY OF STATE TALLAHASSEE FLORIDA Vice Chairman: Address: Address: ___ Director: Address: __ **B. OFFICERS** Address: Vice President: Address: Secretary: . Address: _ Treasurer: Address: ___ NOTE: If necessary, you may attach ap 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.

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Drive
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

GUIA INTERNATIONAL CORPORATION

Domestic Profit Corporation

was formed or was authorized to transact business on 06/14/1989 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 26th day of September, 2011

B: Ph

Brian P. Kemp Secretary of State

Certification Number: 7748709-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp