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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates of	Statue
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Special Instructions to	Filing Officer:	
	Office Use Only	
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SECRETARY OF STAIL

TAIL ANA SECRET OF STAIL

T. Burch (()) 2.57(())

## **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: National Direct Parastions Inc.  Name of corporation - must include suffix	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to regis above referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
Alex Barrios	
Name of Person	
National Direct Promotions DBA No. In	age Marketin
1271 N Tustin Ave	
Address	
Anchem Ca, 92807	
City/State and Zip code	
E-mail address: (to be used for future annual report notification)	<del></del>
For further information concerning this matter, please call:	
Alex Parrios at (714) 575-8947	
Name of Person Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:  New Filing Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  MAILING ADDRESS:  New Filing Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314	
Tallahassee, FL 32301	
Enclosed is a check for the following amount:	
	Filing Fee, ate of Status & d Copy

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

3

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.

(City), Florida 333 19 (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.	1. Nation	nal Direct Promoto	ians Inc.			
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)  2. (State or country under the law of which it is incorporated)  4. Feb. 1, 2000 (Date of incorporation)  (Date of incorporation)  (Date of incorporation)  (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  7. 1271  N. Tustin We Arraham Ca, 92807  (Principal office address)  (Current mailling address)  8. (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: Chekk ND Lay  (City)  (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.   A. A. A. H. S.			" "COMPANY," "CORPORATION,"		2	
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(Current mailing address)  8	(Date			or "perpetual")	<del>)</del>	
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(Principal office address)  N. Tustin We Arnahum Cu, 97807  (Current mailing address)  8		(SEE SECTIONS 607.1501 & 607.15	502, F.S., to determine penalty liability)			
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N'OZAYE	and I am familiar	with and accept the obligations of my pos	sition as registered agent.			
The state of the s		MMHYE				
(Registered agent's signature)		(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: Alex Parios Address: 1271 N. Tustin Ave Anaheim, Ca 92807 Vice Chairman: Director: Address: Director: Address: **B. OFFICERS** President: Alex Baccies Address: 1271 N. Tustin Ave Anaheim, Ca 92807 Vice President: Address: Secretary: \_ 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

14. AUEX BARRIOS PRESIDENT

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

third degree felony as provided for in s.817.155, F.S.

## State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

NATIONAL DIRECT PROMOTIONS INC.

FILE NUMBER:

C2218111

FORMATION DATE:

02/10/2000

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 September 16, 2011.

DEBRA BOWEN Secretary of State

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