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(Requestor's Name)
(Address)
,
(A.H)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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(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		
SUBJECT: Easy Gold, Inc.		
	n - must include suffix	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation fo "Certificate of Existence," or "Certificate of Good Sta above referenced foreign corporation to transact busin	nding" and check are subn	
Please return all correspondence concerning this matter	er to the following:	
Adra E.	Burks	
Name o	f Person	
Law Office of	Adra E. Burks	
Firm/Co	mpany	
P.O. Box	442192	
Add	ress	
Lawrence	, KS 66044	
City/State	and Zip code	
adraburks@	sunflower.com	
E-mail address: (to be used	for future annual report no	otification)
For further information concerning this matter, please	call:	
Adra E. Burks at (785	841-4269	
\	Code & Daytime Telepho	ne Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount:	MAILING AI New Filing Sec Division of Co P.O. Box 6327 Tallahassee, FI	ction rporations
\$70.00 Filing Fee \$\text{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	Easy Gol				
(Enter name of "Inc.," "Co.," '	f corporation; must include "INCORPORAT Corp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"	_	
(If name unava	ailable in Florida, enter alternate corporate na	ame	adopted for the purpose of transacting business in Flori	da)	
2	Missouri ry under the law of which it is incorporated)	_ 3.	74-2831673		
(State or countr	ry under the law of which it is incorporated)	_	(FEI number, if applicable)		
4.	May 6, 1997	5.	Perpetual		
(Da	tte of incorporation)		Perpetual (Duration: Year corp. will cease to exist or "perpetua	")	
6.					
	(Date first transacted busine (SEE SECTIONS 607.1501 & 60 3515 14th St. West, I)7.15	n Florida, if prior to registration) 02, F.S., to determine penalty liability)	_	
/	(Principal office			_	
	same				
	(Current mailing		ress)	11 NOV	
8.	Operation of interne	t m	netal purchasing	₹ 2	
(Purpose	e(s) of corporation authorized in home state of	or co	untry to be carried out in state of Florida) Box NOT acceptable)	ु १	
9. Name and str	eet address of Florida registered agent:	(P.O	Box NOT acceptable)	型 5:	العديدة الإيران ا
Name:	Richard A. Wallis			Sep 	
Office Address:	7613 4th Ave. West				
	Bradenton (City)		, Florida 34209 (Zip code)		
	` 2/		(r)		

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.

12. Names and business addresses of officers and/or directors: A. DIRECTORS 11 KOV 29 Chairman: Address: _ Vice Chairman: Address: Director: Sheila Morley - Wallis Address: 3515 14 St. West, Bradenton, FL 34205 Director: Richard A. Wallis Address: same **B. OFFICERS** President: Sheila Morley - Wallis Address: ____ Vice President: Address: __ Secretary: Richard A. Wallis Address: Treasurer: _____ 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.

14. Sheila Morley - Wallis, President
(Typed or printed name and capacity of person signing application)

STATE OF MISSOURI



Robin Carnahan Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

EASY GOLD, INC. 00440867

was created under the laws of this State on the 6th day of May, 1997, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 10th day of November, 2011

Min Complement Secretary of State

Certification Number: 14311398-1 Reference:

Verify this certificate online at https://www.sos.mo.gov/businessentity/soskb/verify.asp