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TO:	New Filing Sec Division of Cor	porations					
SUBJ	ECT:	Miles	FRA	nklin	Collecti	Bles	
БСВ	Ler	Name o	of corpora	tion - must	include suffix		
Dear S	Sir or Madam:						
"Certi	ficate of Existenc		of Good S	Standing" a	nd check are subr	t Business in Florida," nitted to register the	
Please	return all corresp	ondence concerni	ng this ma	itter to the	following:		
	_	-	Joel	KRA	vit Z		
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For fu	rther information	concerning this ma	atter, plea	se call:			
<u>J</u> 0	el Krav		at (95	ر	582-630	6	
	Name of Perso	n	Aı	rea Code &	Daytime Telepho	one Number	
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327						ction rporations	
	2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301						
Enclos	sed is a check for	the following amo	unt:				
□ \$	70.00 Filing Fee	\$78.75 Filing Certificate o	g Fee & f Status	1 1	5 Filing Fee & fied 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.

		Franklin					•		<u></u>	
(If name unavail:								s in Flor	rida)	
(State or country	under the law	of which it is inc	orporated)		(FEI n	umber, if	applicable)	·		
(Date	of incorporat	ion)	3.	(Duration:	Year corp	. will cea	se to exist or '	'perpetu	al")	
	····					<u> </u>				
	(CEI	(Date first transa E SECTIONS 607								
. .	`	SECTIONS OU	1.1301 & 001.1	JU4. L.J IU U		penany in	autility)			
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(Purpose(s	OFFICE s) of corporation et address of	(Curr	rent mailing add	liess) Client ountry to be c	2;ve 1	Regin state o	janoing	ZAN	+, m) 5:
SO (office a) of corporation at address of Toal	Curr (Curr on authorized in l Florida register	rent mailing add meet home state or cored agent: (P.0	ountry to be c	2, ve 1 T S arried out	Regin state o	janoîng f Florida)	ZAN	+, m) 5:
(Purpose(s) Name and street	office a) of corporation at address of Toal	Curr (Curr on authorized in l Florida register	rent mailing add meet home state or cored agent: (P.0	ountry to be c	2, ve 1 T S arried out	Regin state o	janoîng f Florida)	ZAN	+, m) 5:
(Purpose(s) Name and street	office a) of corporation at address of Toal	Curr (Curr on authorized in l Florida register	rent mailing add meet home state or cored agent: (P.0	ountry to be c	2, ve 1 T S arried out	Regin state o	janoîng f Florida)	ZAN	+, m) 5:
(Purpose(s	office a) of corporation at address of Toal	(Curr	rent mailing add meet home state or cored agent: (P.0	ountry to be c	2, ve 1 T S arried out	Regin state o	janoîng f Florida)	ZAN	+, m) 5:

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. DIRECT	PORS , , ,
Chairman:	DAVID Schectman
Address:	801 Welve ogas Conten Daive # 834
	WM53AM , MN 55391
Vice Chairmar	: Andrew Schectman
Address:	4235 West APM Drive
	Spring PARK; MN 55384
Director:	Soel KRAvite
Address:	7249 Everest lane N.
	marle grove, MN 5539/
Director:	
Address:	
B. OFFICE	လု ႏွံ္ RS ေက်
	DAUID Schectman
Address:	801 puelue oaks Center paire #834
***************************************	WAYZATA IMN 55391
Vice President	Andrew Schecman
Address:	4235 West Am Daive String PARU, MN 5538
Secretary:	Juel Kravite
Address:	7249 Everest lane N. MAPle Grove, MN 553911 Ambrew Schectman
Treasurer:	Andrew Schectman
Address:	4235 West Arm Prive String PARKIMS 55389
NOTE: If no	ecessary, you may attach an addendum to the application listing additional officers and/or directors.
13	Signature of Director or Officer
The officer of	Signature of Director or Officer r director signing this document (and who is listed in number 12 above) affirms that the facts stated herein
are true and the	hat he or she is aware that false information submitted in a document to the Department of State constitutes a Felony as provided for in s.817.155, F.S.
-	Joel KRAvitz
	(Typed or printed name and capacity of person signing application)

Office of the Minnesota Secretary of State Certificate of Good Standing

I, Mark Ritchie, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: Miles Franklin Collectibles, Inc.

Date Filed: 11/16/2009

File Number: 3567973-2

Minnesota Statutes, Chapter: 302A

Home Jurisdiction: Minnesota

This certificate reflects data thru: 04/01/2012

This certificate has been issued on: 04/23/2012

Mark Ritchie

Mark Ritchie

Secretary of State State of Minnesota

