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SECRETARY OF STATE OF STATE OF CORPORATIONS

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#### **COVER LETTER**

TO: New Filing Section Division of Corporations			
SUBJECT: Pacific Star 5, Inc.			
Name of corporation - must include suffix			
Dear Sir or Madam:			
	oineas in Elevido "		
The enclosed "Application by Foreign Corporation for Authorization to Transact Bu "Certificate of Existence," or "Certificate of Good Standing" and check are submitte above referenced foreign corporation to transact business in Florida.			
Please return all correspondence concerning this matter to the following:			
John Cooper			
Name of Person			
Cooper and Associates			
Firm/Company			
8880 Rio San Diego Dr Ste.	300		
Address			
San Diego, CA 92108  City/State and Zip code			
,			
E-mail address: (to be used for future annual report notified	cation)		
For further information concerning this matter, please call:			
1.	_		
John Cooper at (619) 285-2953			
Name of Person Area Code & Daytime Telephone Number			
	12 12		
STREET/COURIER ADDRESS: MAILING ADDR	ess: ÈS		
New Filing Section  New Filing Section	<b>Lil</b>		
Division of Corporations  Clifton Building  Division of Corporations  P.O. Box 6327			
2661 Executive Center Circle Tallahassee, FL 32	314 <b>3</b> 3 9 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9		
Tallahassee, FL 32301	LEB Y OF STATE ORPORATIO PM 4: 13		
Enclosed is a check for the following amount:	13		
\$70.00 Filing Fee \( \text{Certificate of Status} \) \( \text{S78.75 Filing Fee & Certified Copy} \)	\$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. Pacific Star S. 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 name adopted for the purpose of transacting business in Florida)  2. Wyoming  3. 33-0944191
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. O1/10/2001 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 6899 Collins Ave # N2708 Miami Beach, FL 33141
(Principal office address)
7306 Collins Ave # 46 Miami Beach, FL 33141 (Current mailing address)
8. Real Estate Investments (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: Grant Cardone
Office Address: 7306 Collins Ave# 46
T(\alpha   Deach   , Florida   3514  \( \tau \)
(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 dutie
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 daily 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:	SETERFTAR	LED Y OF STATE
A. DIRECTORS	TIVISICHTOFT	ORPORATIONS
Chairman: Orant T Cardone	12 AUG 31	PM 4: 13
Address: 6899 Collins Ave # N2708	·	
Miami Beach, FL 33141		
Vice Chairman: Covant T Cardone	·	<del></del>
Address: 6899 Collins Ave # N2708		
Miami Beach, FL 33141		
Director: Grant T Cardone		
Address: 6899 Collins Ave # N2708		
Miami Beach, FL 33141		
Director:		
Address:		
B. OFFICERS		
President: Grant T Cardone		
Address: 6899 Collins Ave # N 2708		
Miami Beach, FL 33141		<del>.</del>
Vice President: Grant T Cardone		
Address: 6899 Collins Ave # N2708		-
Miami Beach, FL 33141		
Secretary: Grant T Cardone		
Address: 6899 Collins Ave # NZ708 Miami B	seach fl	33141
Treasurer: Grant T Cardone		
Address: 6899 Collins Ave # N2708 Miami Bea	ich, fi	-33141
NOTE: If necessary, you may attach an addendum to the application listing additional officers a	nd/or directors.	
13		
Signature of Director of Officer The officer or director signing this document (and who is listed in number 12 above) affirms that are true and that he or she is aware that false information submitted in a document to the Department degree felony as provided for in s.817.155, F.Ş.	the facts stated I	nerein stitutes a
14. <u>Grant T Cardone</u> , <u>Owne</u> (Typed or printed name and capacity of person signing application)	W	

## STATE OF WYOMING Office of the Secretary of State

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Pacific Star 5, Inc.

is a

#### **Profit Corporation**

formed or qualified under the laws of Wyoming did on **January 10, 2001**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2001-000415459**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 29th day of August, 2012 at 10:30 AM. This certificate is assigned 012545515.



May Massiele Secretary of State

SEGRETARY OF STATE OF STATE OF CORPORATIONS

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.