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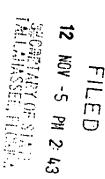
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Harse Lickers, Inc.		
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:		
Rod Ect		
Name of Person		
House Pickons Tala		
Firm/Company		
2100 11) 201h C+		
Address		
D. C.J. El 2246		
City/State and Zip code		
Costs a second and sip cody		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Born (11+1) or 710 out 7		
Devel.10 (1) 704 at (850) 169-045/		
Name of Person Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: MAILING ADDRESS: **		
New Filing Section New Filing Section		
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327		
2661 Executive Center Circle Tallahassee, FL 32314		
Tallahassee, FL 32301		
Enclosed is a check for the following amount:		
\$70.00 Filing Fee \$78.75 Filing Fee \$ Certificate of Status \$78.75 Filing Fee \$ Certificate of Status \$ Certified Copy		

APPLICATION BY FÓREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1303, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.
House Yickors - 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. Nevada 3.
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 10/25/12 5. Respetual
(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)
7.3100 w. 30th Ct., Varama City, th 324055 in 5
(Principal office address)
(Current mailing address)
8. Business management and Consulture (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: Bod Estes
Office Address: 3100 W. 30th Ct.
Grama City, Florida 32405 (Zip code)
0. Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated corporation at the plac lesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. Further agree to comply with the provisions of all statutes relative to the proper and complete performance of my du and I am familiar with and accept the obligations of my position as registered agent.
Ron Estes
(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:	F11
A. DIRECTORS	FILED
Chairman: Kon Estes	12 NOV -5 PH 2: 43
Address: 300 W, 30th Ct.	TALL STATE OF STATE
Parima City, FL 32465	THOUSE, FLORING
Vice Chairman: Beverly CIFFON	
2100 11 200 01	
Address: DO W 30h Ct.	
Tarama City +2 5265	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
A. Schoo	
President: 100 CSUS	
Address: 300 W . 3047 (± .	
tanama City 12 32405	
Vice President:	
Address:	
Secretary: Revenu Cifton	
Address: 310 W. 30th Ct. Yarama C	F. F. 32405
Treasurer: Beverly (1++++++++++++++++++++++++++++++++++++	
2102 (1) 2 11 (1)	I FI BAING
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NOTE: If necessary, you may attach an addendum to the application listing additional add	
13. Rui Estis, President Signature of Director or Officer	<u>* </u>
The officer or director signing this document (and who is listed in number 12 above	
are true and that he or she is aware that false information submitted in a document t third degree felony as provided for in s.817.155, F.S.	o the Department of State constitutes a
14. Ron Estes Prosident	
(Typed or printed name and capacity of person signing app	lication)

SECRETARY OF STATE



NOV -5 PH 2: 43 METARY OF STATE ANIASSEE, FLORED

CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **HOUSE PICKERS**, **INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since October 25, 2012, and is in good standing in this state.

GEAL OF THE STATE OF THE STATE

ROSS MILLER

office on November 2, 2012.

ROSS MILLER Secretary of State

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my

Electronic Certificate
Certificate Number: C20121102-1110
You may verify this electronic certificate
online at http://www.nvsos.gov/