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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: EDO Investment Solutions, 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:
Erika Oetman
Name of Person
Firm/Company
603 Red Fern Road Crestview, FL 32536
Address
Crestview, FL 32536
City/State and Zip code
EDO I nuest ments @ cox. net
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Erika V. Oetman (850) 612 - 0693 Name of Person Area Code & Daytime Telephone Number
Name of Ferson Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: MAILING ADDRESS:
New Filing Section New Filing Section
Division of Corporations Division of Corporations
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314
Tallahassec, FL 32301
Enclosed is a check for the following amount:
\$70.00 Filing Fee Certificate of Status \$78.75 Filing Fee & Certified Copy \$87.50 Filing Fee, Certified Copy 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. EDO Investment Solutions, 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. Ne va da
(State or country under the law of which it is incorporated)

(State or country under the law of which it is incorporated)

(Duration: Year corp. will cease to exist or "perpetual")

6. 14/1/20/30/3

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 603 Red Fern Road Crestiew FL 32536

(Principal office address)

(Current mailing address)

(Current mailing address)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

10. Registered agent's acceptance:

Name:

Office Address:

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.

203 Red Fern Rd Crestiew, Florida 30536 (City) (Zip code)

(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: Road Address: 32536 Crestview Florida Vice Chairman: Address: Oetman Director: Road Address: Florida 32536. Director: Roac Address: **B. OFFICERS** President: Address: Vice President: Koad 32536 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

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

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.

SECRETARY OF STATE



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, **EDO INVESTMENT SOLUTIONS**, **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 November 19, 2012, and is in good standing in this state.

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Electronic Certificate
Certificate Number: C20121205-0446
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on December 5, 2012.

ROSS MILLER Secretary of State

12 DEC 26 AM 9: 04 SECRITARY OF STATE TALLAHASSEE FLORIDA