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Certified Copies	Certificates	s of Status
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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

Ps 1/28/03

#### **COVER LETTER**

TO: New Filing Section Division of Corporations		
SUBJECT: KLI Investment	Group, Inc.	
Name of corporation - must inc	lude suffix	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for Authorizat "Certificate of Existence," or "Certificate of Good Standing" and above referenced foreign corporation to transact business in Florida.	check are submitted to register the	
Please return all correspondence concerning this matter to the foll	owing:	
NELSON L. RODRIGUE	62	
Name of Person		
··	·	
Firm/Company		
Address  Orlando, FL 32828  City/State and Zip code  Klisolutions 1 a qmail. com  E-mail address: (to be used for future annual report notification)		
Address		
Orlando, FL32828	<del></del>	
City/State and Zip cod	e	
Klisolutions 1 20 qma, 1. com	nnual report notification)	
	maar report normeanon,	
For further information concerning this matter, please call:		
NUE 1 / PORO 16162 221 247-5676		
Name of Person Area Code & Daytime Telephone Number		
New Filing Section Division of Corporations Clifton Building	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314	
Enclosed is a check for the following amount:		
\$70.00 Filing Fee \$\ \text{Certificate of Status} \ \ \text{\$\subseteq} \ \ \ \text{Certified} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	iling Fee & \$87.50 Filing Fee, Copy 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. KLI Investment Group, 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) (State or country under the law of which it is incorporated) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Current mailing address) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable) Name: Office Address: ⇒ 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	
Chairman: NELSON L RODRIGUEZ	<del> </del>
Address: 13611 WATERHOUSE WAY	
Address: 13611 WATERHOUSE WAY Orlando, FL 32828	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	<u> </u>
	SECRET SECRET
B. OFFICERS	N 25
President: NELSON L RODRIGUEZ	2 2 2 2 2
Address: 13611 WATERHOUSE WAY	STAT STAT
Address: 13611 WATERHOUSE WAY Orlando, FL 32828	ENS 22
Vice President:	
Address:	
Secretary: NGLSW. L. PODRIGUEZ	
Secretary: NGLS2N L. PODRIGUEZ  Address: 13611 WATERHOUSE NAY Orlando, FL 32828	
Treasurer: NELSON L. RODRIGUEZ	
Address: 13611 WATER HOUSE WAY Orlando FL 32828	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directo	rs.
13.	
Signature of Director or Officer  The officer or director signing this document (and who is listed in number 12 above) affirms that the facts state	ed herein
are true and that he or she is aware that false information submitted in a document to the Department of State of third degree felony as provided for in s.817.155, F.S.	
14. NEWSON L. RODPIGUEZ PRESIDENT	
(Typed or printed name and capacity of person signing application)	

## 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, **KLI INVESTMENT GROUP, 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 20, 2012, and is in good standing in this state.

office on December 21, 2012.

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

ROSS MILLER Secretary of State

Electronic Certificate
Certificate Number: C20121221-0364
You may verify this electronic certificate
online at http://www.nvsos.gov/