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PICK-UP	☐ WAIT	MAIL		
. (Bu	usiness Entity Nan	ne)		
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SECRETARY OF STATE STATE SECRETARY OF CORPORATIONS

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## **COVER LETTER**

**TO:** New Filing Section Division of Corporations

SUBJECT: 5(1)	VERADO M	ANAGEMENT	GROUP . INC
		ation - must include suffix	•
Dear Sir or Madam:			
	or "Certificate of Good	for Authorization to Transa Standing" and check are sub usiness in Florida.	
Please return all correspor	idence concerning this m	atter to the following:	
Mike Rugu	SilvenADO M	MANAGEMENT G	law INC
	Name	e of Person	
	12: //		
		Company	
7880 GALA Pengacola	buy CT		
	, A	Address	
Pencacola	FL	32506	
	City/Sta	ate and Zip code	
			4
	E-mail address: (to be u	sed for future annual report	notification)
P 6			
For further information co	ncerning this matter, pier	ase can:	
mike,			•
Leane Kus		0 <u>291 794</u>	
Name of Person	Α	rea Code & Daytime Teleph	ione Number
STREET/COUR	IFR ADDRESS:	MAILING A	DDRESS:
New Filing Section		New Filing S	
Division of Corpo		Division of C	
Clifton Building		P.O. Box 632	
2661 Executive C	enter Circle	Tallahassee, I	FL 32314
Tallahassee, FL 3	2301		
Enclosed is a check for the	e following amount:		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 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. SI /VELADO MANAGEMENT GROUP, INC	DN1 ''
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATIO" "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	JN,"
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transact	ing business in Florida)
2. <b>NEVA-DA</b> (State or country under the law of which it is incorporated)  3. (FEI number, if ap	unlicable)
4. 6-21-2013 5. Per Petual (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 liab	lity)
7. 7880 GALAYY &T PENGACOLA FL (Principal office address)	32506
(Principal office address)	-
(Current mailing address)	
	AUG
B. MANAGEMENT AND CONSULTING	
(Purpose(s) of corporation authorized in home state or country to be carried out in state of F	lorida) con
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	
Name: Mike Rush	Se Ame
Office Address: 7880 GALANI CT	<b>₩</b>
Name: MIRE KUSH  Office Address: 7880 GALAXY CT  PENSACOLA , Florida 32506 (City) (Zip code)	
(City), Florida 32566	
(Sip 6046)	

## 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: Vice Chairman: Address: Director: Mike Rusky Address: 7880 GALASEY CT Director: **B. OFFICERS** President: Mike Rush Address: 7880 GALAYY CT Persona FC 32506 Vice President: Address: Secretary: Mike Rush Address: 7880 GALAXY CT PERSACOLA FL 32506 Treasurer: Mrke Rush Address: 7880 GALANY CT PensacolA 32506 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 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. 14. MIKE RUSH

(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, SILVERADO MANAGEMENT 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 June 21, 2013, and is in good standing in this state.

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Electronic Certificate
Certificate Number: C20130807-2817
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 August 7, 2013.

ROSS MILLER Secretary of State

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