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(Re	equestor's Name)						
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PICK-UP	☐ WAIT	MAIL					
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Certified Copies	_ Certificates	s of Status					
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SECRETARY OF STATE TALLAHASSEE FLORIDA

AND THE STATE OF T

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W3-6183

COVER LETTER

TO:	New Filing Second Division of Cor					
SUBJ	ECT: E&B	ASSOCIATES, IN	NC.			
			tion - must include suffix			
Dear S	ir or Madam:					
"Certif	ficate of Existence		for Authorization to Transac Standing" and check are subm siness in Florida.			
Please	return all corresp	ondence concerning this ma	atter to the following:			
BRU	ICE BYRNE					
		Name	e of Person	· · · · · · · · · · · · · · · · · · ·		
E &	B ASSOC	IATES, INC.				
		Firm/0	Company	· · · · · · · · · · · · · · · · · · ·		
30 L	JIBERTY W	'AY 7				
	•	A	ddress			
PAL	M HARBOR	, FLORIDA 34684				
		City/Sta	ite and Zip code			
Legh	orn68@gma	il.com				
		E-mail address: (to be us	sed for future annual report n	otification)		
For fur	ther information	concerning this matter, plea	se call:			
Bruc	e Byrne	at (941	, 587-6078			
	Name of Person		rea Code & Daytime Telepho	one Number		
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			New Filing Sec Division of Co P.O. Box 6327	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclos	ed is a check for t	the following amount:				
□ ^{\$7}	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		

November 13, 2013

New Filing Section
Division of Corporations
ATTN: Jessica A Fason
P.O. BOX 6327
Tallahassee, Florida 32314

Dear Jessica Fason,

Enclosed you will find the alternate name for E & B Associates, Inc., so we may begin doing business in Florida. As per our conversation, I have made our alternate name E & B Assoc., Inc. Thank you for your help in making this decision.

Sincerely,

Elizabeth Brookhart

Taboth Brookbort

Director

13 NOV 18 PH 3: 08

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.

l.	E & B ASSOC						_
		rporation; must include "INCORPORATI rp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"			
	E & B ASSOC						_
	•	ble in Florida, enter alternate corporate na		adopted for the purpose of transacting busi	ness in F	lorida)
	NEVADA		3.	90-1008400			_
	(State or country u	inder the law of which it is incorporated)		(FEI number, if applicable)		
4.	06/17/13		5.	PERPETUAL			
	(Date	of incorporation)		(Duration: Year corp. will cease to exist	or "perp	etual'')	
6.	UPON APPE	ROVAL					
				n Florida, if prior to registration) 502, F.S., to determine penalty liability)			_
7.	701 N GREI	EN VALLEY PKWY SUITE	20	0, HENDERSON, NEVADA	8907	4	
•		(Principal office	add	ress)			_
	30 LIBERT	Y WAY 7, PALM HARBO	R,	FLORIDA 34684			
		(Current mailing	add	ress) .		. , ,,,,,,,,	
8.	BUSINESS	DEVELOPMENT			SEC	ಪ	
	(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.C	D. Box NOT acceptable)	TARY ASSE	8	apresent of the
	Name:	JOHN G. THOMANN			E S	PH 3:	
O	ffice Address:	29250 US19 NORTH 433			STATE	000	
		CLEARWATER		, Florida 33761-2192	A	ń	
		(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 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: Bruce Byrne Address: 30 Liberty way 7 Palm Harbor, FL 34684 Vice Chairman: Elizabeth Brookhart Address: 30 Liberty Way 7 Palm Harbor, FL 34684 Director: Bruce Byrne Address: 30 Liberty way 7 Palm Harbor, FL 34684 Director: Elizabeth Brookhart Address: 30 Liberty Way 7 Palm Harbor, FL 34684 **B. OFFICERS** President: Bruce Byrne Address: 30 Liberty way 7 Palm Harbor, FL 34684 Vice President: Elizabeth Brookhart Address: 30 Liberty way 7 Palm Harbor, FL 34684 Secretary: Elizabeth Brookhart Address: 30 Liberty way 7 Treasurer: Bruce Byrne Address: 30 Liberty way 7 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. Bruce Byrne Director; Eizabeth Brookhart Director