Division of Corporations **Electronic Filing Cover Sheet**

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FOREIGN PROFIT/NONPROFIT CORPORATION

FDL Investments, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	-94-05
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Electronic Filing Menu

Corporate Filing Menu

OCT 09 2015

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COVER LETTER

	tration Section					
SUBJECT:	•	nts of Nevada, I	Inc.			
SUBJECT.	T. 10 T. 10 T. 10	Name o	f corporation	- must	include suffix	
Dear Sir or M	adam:					
"Certificate of		r "Certificate	of Good Star	ding" a	nd check are sub	ct Business in Florida," mitted to register the
Please return David R. Fry	all correspond	ence concerni	ng this matter	to the f	ollowing:	
			Name of	Person		
FDI. Investme	nts of Nevada, l	ne,				
16350 Bruce B	. Downs Bould	vard, #46245	Finn/Com	pany		
 			Addre	ss		
Tampa, Florida	33646					
tbtfaith2014@	gmail.com		City/State a	nd Zip c	ode	
	ŀ	-mail address:	(to be used I	or futur	e annual report r	notification)
For further in	formation con	cerning this m	atter, please o	all:		
Alfred A. Colb	у		813 at (276-	1920	
Name	e of Person		Area Cod	/	Daytime Telep	hone Number
Regis Divis Clifto 2661	EET/COURI tration Section ion of Corpora in Building Executive Cer nassee, FL 32	tions ter Circle	5 :		MAILING A Registration S Division of Co P.O. Box 6327 Tallahassec, F	ection orporations 7
Enclosed is a	check for the	following amo	unt:			
∏ \$70,00 Fil	ing Fee 🙃	\$78.75 Filing Certificate o			S Filing Fee & ied Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy

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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.

	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATIO	on,"	
FDL Investment			•	
Nevada	ble in Florida, enter alternate corporate name a	dopted for the purpose of transacti	ing business in Florida)	
(State or country June 19, 2015	3, under the law of which it is incorporated) 5.	(FEI number, if applicable)		
(Date of incorporation)		(Date of duration, if other	er than perpetual)	
!•	owns Boulevard, #46245, Tampa, Florida 336 (Principa	office address)	· · · · · · · · · · · · · · · · · · ·	
	(Current mailing	g address, if different)	15 OCT	
B. Name and stree	t address of Florida registered agent: (P.O	. Box <u>NOT</u> acceptable)		
Name:	Alfred A. Colby		(A) (A)	
Name: Office Address:	Alfred A. Colby 305 South Boulevard		# 7:2 10:25	

9. 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)

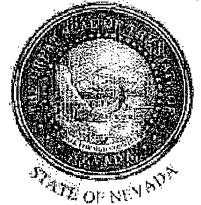
10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

Vico Cha	rnen:			
Director:	David R. Fry			
	16350 Bruce B. Downs Boulevard, #46245, Tampa, Florida 33646			
Director:	Lisa M. Yry			
	16350 Bruce B. Downs Boulevard, #46245, Tampa, Florida 33646			
B. OFF	David R. Fry		15 OC	
resident: Address:	16350 Bruce B. Downs Boulevard, #46245, Tumpa, Florida 33646	(2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	1-8 NH	7
	dent:		7: 20	ندار الآ وي الا
ecretniy:	Lisa M. Fry			<u>-</u>
Address:	16350 Bruce B. Downs Boulevard, #46245, Tampa, Florida 33646			
reasurer:	David R. Fry			 -
	16350 Bruce B. Downs Boulevard, #46245, Tampa, Florida 33646			
2. The office re true as third de	Signature of Director or Officer or or director signing this document (and who is listed in number 11 above) affirms that that he or she is aware that fulse information submitted in a document to the Department effective as provided for in s.817.155, F.S.	the facts stat	ed here	ein
3. David	(Typed or printed name and capacity of person signing application)			

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CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, 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, FDL INVESTMENTS, 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 19, 2015, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Scal of State, at my office on October 6, 2015.

BARBARA K. CEGAVSKE

Secretary of State

Electronic Certificate
Certificate Number: C20151006-0037
You may verify this electronic certificate
online at http://www.nvsos.gov/