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### **COVER LETTER**

TO:	: Registration Section					
	Division of Corporations					
CTIDI	AMERICAN INTERN	IATIONAL VENTUR	ES INC.			
SUDJ	ECT:	Name of corporation	- must include suffix			
	·	poranon	mast metade samm	,		
Dear S	Sir or Madam:					
"Certi	nclosed "Application by Fore ficate of Existence," or "Cert referenced foreign corporation	ificate of Good Stan	ding" and check are su			
	return all correspondence co WAGENTI	oncerning this matter	to the following:			
-		Name of	Person			
		Firm/Com	pany			
15105	KESTRELGLEN WAY					
		Addre	ess			
LITHI	A, FLORIDA 33547					
inaluun	aanti@airm aa	City/State a	nd Zip code			
jackwa	genti@aivn.co					
	E-mail a	ddress: (to be used t	for future annual repor	t notification)		
For fu	rther information concerning	this matter, please of	call:			
JACK	WAGENT at (8/3) 944-2988					
	Name of Person	Area Cod	e Daytime Tele	ephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
Enclos	sed is a check for the following	ng amount:				
<b>5</b> \$70		5 Filing Fee & Ticate 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. AMERICAN INTERNATIONAL VENTURES, INC. 1. (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) 22-3489463 2. (State or country under the law of which it is incorporated) (FEI number, if applicable) JANUARY 1998 **PERPETUAL** (Date of incorporation) (Date of duration, if other than perpetual) SEPTEMBER 8, 2015 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 15122 TEALRISE WAY, LITHIA FL 33547 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) JACK WAGENTI Name: 15105 KESTRELGLEN WAY Office Address: LITHIA , Florida

#### 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.

(Zip code)

(City)

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. Nan	nes and business addresses of officers and/or directors:	
A. DIR	ECTORS JACK WAGENTI	
Chairman	:	
	151O5 KESTRELGLEN WAY	
Address:	LITHIA, FL 33547	
Vice Cha	irman:	
Director:	ARTHUR DEWITT (TERRY) ACKERMAN	
Address:	15122 TEALRISE WAY	
Address.	LITHIA, FL 33547	
Director	FREDERICK R. DUNNE JR.	, , , , , , , , , , , , , , , , , , ,
	15122 TEALRISE WAY	
Addiess.	LITHIA, FL 33547	
B. OFF	ICERS JACK WAGENTI	
President	15105 KESTRELGLEN WAY	
Address:	13103 RESTRELUEEN WAT	2015 A.C.
	LITHIA, FL 33547	LAHE OCCI
Vice Pres	ident:	27 27
		9: 5; 0::51
Secretary		<b>y</b>
Address:	15105 KESTRELGLEN WAY	
Treasurer	LITHIA, FL 33547	
Address:		
NOTE:	If necessary, you may attach an addendum to the application listing additional	al officers and/or directors.
12	Jack Malla	
are true a	Signature of Director or Officer cer or director signing this document (and who is listed in number 11 above) and that he or she is aware that false information submitted in a document to tegree felony as provided for in s.817.155, F.S.  K WAGENTI, SECRETARY	affirms that the facts stated herein he Department of State constitutes

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

Page 1

# Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "AMERICAN INTERNATIONAL VENTURES,

INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE

AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR

AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF

OCTOBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AMERICAN

INTERNATIONAL VENTURES, INC." WAS INCORPORATED ON THE THIRTEENTH

DAY OF JANUARY, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

The state of the s

Authentication: 10259038

Date: 10-19-15

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