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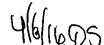




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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: HPC Acquisitions, Inc. Name of corporation - must include suffix	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Bu "Certificate of Existence," or "Certificate of Good Standing" and check are submitted above referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
Michael J. Ryan	55 5
Michael J. Ryan Name of Person Kyan Low Group, LLC Firm/Company	CARLES THE PARTY OF THE PARTY O
Firm/Company	
636 U.S. Itwy 1, Stz 110 Address	- 温湯 宝 ロ
	CRID.
North PALM BEACH 7L 33408 City/State and Zip code	
E-mail address: (to be used for future annual report notification concerning this matter, please call:	cation)
Mike Ryan at (561) 881,4447 Name of Person Area Code Daytime Telephone 561 309 2226	Number, Mobile)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Cli ton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDR Registration Sectio Division of Corpor P.O. Box 6327 Tallahassee, FL 32301	on rations
Enclosed is a check for the following amount:	
□ \$70.00 Filing Fee \$78.75 Filing Fee & □ \$78.75 Filing Fee & □ Certificate of Status □ 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.

(State or country under Sune 7, 3 (Date of inco	OO 6 Orporation) (Date first trait (SEE SECTIONS 6	5.	(Date o	of duration, if other		
-	(Date first trai (SEE SECTIONS 6	nsacted business in			than perpetual)	
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	(SEE SECTIONS 0	nsacted business in				
	(SEE SECTIONS 0	nsacted business in				
636 U.S. H	•	607.1501 & 607.15	n Florida, if prior 502. F.S., to deter	to registration) mine penalty liabil	itv)	
	www 1. Ste					÷
	0	(Princip	pal office address)		
					- 1888 3	<u> </u>
		(Current mailin	ng address, if diff	erent)		
Name and street addr		•	•	•		* O
Name: <u>M</u>	chael J 1	Ryan			3. -	- Marine
Name: <u>M</u> Tice Address: <u>24</u> We	00 Preside	ential Wa	ry, Apt	1801		
10e	+ Palm Beac	ch	, Florida_	33401		
	(City	<i>'</i>)		(Zip code)		
Registered agent's a aving been named as signated in this appli orther agree to comply ties, and I am familio	registered agent an cation, I hereby acc with the provisions	cept the appointr s of all statutes r	nent as register relative to the p	red agent and agr roper and compl	ree to act in this ete performance	capacity

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:	
A. DIRECTORS	
Chairman: DAVID SELAKOVIC	
Address: 304 Royal Poinciana WAY, #317-395	
Palm Beach 7L 33480	
Vice Chairman:	
Address:	
Director: Craig Laughlin	
Address: 10935 57 Th Ave. No.	
Plymouth MN 55442	
Director:	
Address:	•
	17. E
B. OFFICERS	CARA F
President: Craig Laughlin	
Address: 10935 57 Ave. No.	
Plymouth MN SS442	<u> </u>
LEO Vice President: David Sela Kovic	3.5
Address: 304 Royal Poinciana WAY * 317-395,	
Palm Bch. FL 33 480	
Secretary: Craig Laughlin	
Address: 10935 57Th Ave. No., Agnouth MN	55447
Treasurer: David Selakovic	
	M Ball # 33400
·	
NOTE: If necessary, you may attach an addendum to the application listing additional of	officers and/or directors.
12. Signature of Director or Officer	
The officer or director signing this document (and who is listed in number 11 above) affi are true and that he or she is aware that false information submitted in a document to the	
a third degree felony as provided for in s.817.155, F.S.	-0.v/
13. DAVID SELAKOVIC (Naimon) (co)Treasure (Typed or printed name and capacity of person signing application)	(on)
(1) ped of printed hame and capacity of person signing applicant	OII,





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, HPC ACQUISITIONS, 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 7, 2006, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on March 28, 2016.

Barbara K. Cegavske
BARBARA K. CEGAVSKE
Secretary of State

Electronic Certificate
Certificate Number: C20160328-1654
You may verify this electronic certificate
online at http://www.nvsos.gov/