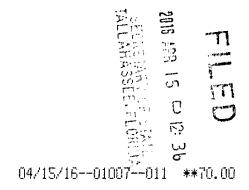
Floowway70

(Requestor's Name)		
(Address)		
	Address)		
	City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates of	Status	
Special Instructions to Filing Officer;			

Office Use Only



500284625185



16 APR 15 PM 1:58

**CI INTENDED
TO ACKNOWLEDGE
SHEFICIENCY OF FILING

APR 18 2016 J. BRUCE

Simplete Resea	No location with the second se	
Requester's Name	e e e e e e e e e e e e e e e e e e e	
Address Sig	5454	
Chy/State/Zip Phone ₹	110-11, . **-, 13-11 (1-11)	
	្ន	e Use Only
CORPORATION NAME(8) & DOC	OMENT MEDICALIS), (II 1000	era):
1. Market Proved	(Documents)	agl.
? (Corporation Name)	(Document \$)	
2. (Corporation Name)	(Document 生)	
(Comporation Name)	(Document 2)	THE SE TO
Walk in Pick up time	_	Certified Cop S
Mail out Will weit	_/	Certificate of Status C
NEW KLINGS	AVENDMENTS	်း မ ဦး မ
Profit	Amendman	3 T
I Not for Profit Indied Liability Domestication	Fasignation of R.A., Change of Registers	Umcer/Director
Domestication Other	Dissolution WithdraMerger	Maj
other filings	REGISTRATIONOU	<u>LIFICATION</u>
Annual Report	Foreign	
≟ Fictitions Name	Li Limited Parinership Reinstatement	
	Trademark	•
		*:
·		Examiner's Initials

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," "CORPORATION,"		
(If name unavails	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)		
New York	3.	11-2903885		
,	y under the law of which it is incorporated)	(FEI number, if applicable)		
March 10, 1988	5.			
(Date	of incorporation)	(Date of duration, if other than perpetual)		
		n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
10807/10809 NW	29th Street, Doral, Florida 33172	502, 1.0., to determine penalty hability)		
	(Princi	pal office address)		
	(CTWE	,		
	(Current maili	ng address, if different)		
Name and street	et address of Florida registered agent: (P.	O. Box NOT acceptable)		
Name:	Wang, Xiannan			
	10807/10809 NW 29th Street	E E E E E E E E E E E E E E E E E E E		
fice Address:	Doral			
		, Florida		
	(City)	(Zip code)		
Registered age	ent's acceptance:	<u>्र</u>		
		ice of process for the above stated corporation at the pla ment as registered agent and agree to act in this capacit		
	annlication. I haraby account the annoint			
signated in this rther agree to c	omply with the provisions of all statutes	relative to the proper and complete performance of my		
signated in this rther agree to c		relative to the proper and complete performance of my		
signated in this rther agree to c	omply with the provisions of all statutes a amiliar with and accept the obligations of	relative to the proper and complete performance of my of my position as registered agent.		
signated in this rther agree to c	omply with the provisions of all statutes a amiliar with and accept the obligations of	relative to the proper and complete performance of my		

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.

I

11. Name	es and business addresses of officers and/or directors:		
A. DIRE	ECTORS Betty Lee		
Chairman:			
Address:	1024 N. 42nd Place , Renton, WA 98056		
-			
Vice Chair	man:		
Address:			
_			
Director:			
Address:			
_			
Director:			
Address:			
B. OFFI	CERS		
President:	Suchen Lin		
	49 Crescent Lane, East Hills, NY 11577		
Audices,			
Vice Presi	Betty Lee	= -3	
	1024 N 42nd Place Penton WA 98056	200	www.
Address: _	1024 N. 421d Flace, Remon, WA 70050		Oraniana oraniana p. N
	Betty Lee	550	
Secretary:	1024 N. 42nd Place , Renton, WA 98056	T C	Ü
Address: _	Betty Lee	12: 12: 13: 13: 13: 13: 13: 13: 13: 13: 13: 13	
Treasurer:		ु ु ्	
Address: _	1024 N. 42nd Place , Renton, WA 98056		
NOTE: 1	f necessary, you may attach an addendum to the application listing additional office	ers and/or directe	ors.
12	× Swellon Jin 4/12/2016		
The office are true as	Signature of Director or Officer or or director signing this document (and who is listed in number 11 above) affirms and that he or she is aware that false information submitted in a document to the Department of the Department		
	en Lin, President		
	(Typed or printed name and capacity of person signing application)		

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of MARKET PIONEER INTERNATIONAL CORP. was filed on 03/10/1988, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



Witness my hand and the official seal of the Department of State at the City of Albany, this 13th day of April two thousand and sixteen.

Anthony Giardina

Executive Deputy Secretary of State

201604140445 * 52