# FLACOCOASTA

(Re	equestor's Name)			
(Ac	ddress)			
(Ac	ddress)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	usiness Entity Nar	me)		
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				
		,		
L				

Office Use Only



600286439346

06/06/16--01045--015 \*\*87.50

2016 JUN -6 P 1: 40

JUH OF ROLE

#### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: MASON INVESTORS GROUP
Name of corporation - must include suffix
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:  Brian W. Mason  Name of Person
MASON INVESTORS GROUP
1712 Pioneer Ave. #338 Address
Cheyenne WY 92001 City/State and Zip code
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:
For further information concerning this matter, please call:
Brian Mason at (760) 774 3598 — Daytime Telephone 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
Enclosed is a check for the following amount:
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & □ \$78.75 Filing Fee & □ \$78.75 Filing Fee & □ \$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.

1. MAJON	I INVESTORS GROUP I	n(·	
	poration; must include "INCORPORATED," "Crp," "Inc," "Co," or "Corp.")	OMPANY," "CORPORATIO	N,"
nie., co., coi	p, me, co, or corp. )		
MASON	ENTERPRISES IN	T. Inc.	
(If name unavailab	ole in Florida, enter alternate corporate name adop		
2. Wyoni,	14] 3.	47-323901	5
(State or country-	under the law of which it is incorporated)	(FEI number, if ap	oplicable)
	5.	Per	petual
(Date o	f incorporation)	(Date of duration, if other	than perpetual)
6. Haven't	- done anything yet		
	(Date first transacted business in Flo		:>
1717 1	(SEE SECTIONS 607.1501 & 607.1502,	• •	_
7. 1112 P	ioneer Ave. #338, Cher (Principal of	ienne, WI B	2001
004	(Principal of	fice address)	7. 2
229 10	E TTH PL, Cape Core	11, FL 33 909	
	(Current mailing ad	dress, if different)	
			Sold of the
8. Name and street	address of Florida registered agent: (P.O. Bo	ox NOT acceptable)	Fa o o
Name:	REGISTERED AGENTS INC.	-	
Office Address:	3030 N. Rocky Point Drive, STE 150/	<u> </u>	7: 49 1: 49 1: 119 1: 119
	TAMPA	, Florida 33607	
	(City)	(Zip code)	

#### 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.

Bill Havre/Secretary/Registered Agents Inc.

(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:		
A. DIRECTORS		
Chairman: Brian W. Mason		,
Address: 229 NE 7TH PL		
Address: 229 NE 7TH PL Cape Coral, FL 33909		
Vice Chairman:		
Address:		
Director:		
Address:		
Director:		<del></del>
Address:	·	
<del></del>	<del> </del>	· · · -
B. OFFICERS		
President: Brian W. Mason		<del></del>
Address: 229 NE 7TH PL  Cape Coral, FL 33909		
Cape Coral, FL 33404	<u> </u>	
Vice President:		
Address:	ASSE -	1
	<u> </u>	[ 1 ]
Secretary: Jennifer J. Mason	G	
Address: 229 NE TTH PL, Cape (oral, FL 33909	TO A	
Treasurer: Brian W. Majon		
Address: 229 NE 7TH PL, Cape Coral, FL 33909	····	
NOTE: If necessary, you may attach an addendum to the application listing additional office	cers and/or directe	ors.
12. Brian W. Mason 5/31/2016, Signature of Director or Officer		
The officer or director signing this document (and who is listed in number 11 above) affirm		
are true and that he or she is aware that false information submitted in a document to the De a third degree felony as provided for in s.817.155, F.S.	partment of State	constitutes
13. Brian W. Mason, Chairman, CEO, President, and	Treasurer	

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

## STATE OF WYOMING Office of the Secretary of State

I, ED MURRAY, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

#### **MASON INVESTORS GROUP**

## is a **Profit Corporation**

formed or qualified under the laws of Wyoming did on **January 23, 2015**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2015-000679595**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 1st day of June, 2016 at 10:29 AM. This certificate is assigned 020284529.



Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.