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	(Requestor's Name)					
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	(City/State/Zip/Phone #)	 				
PICK-UF	P WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
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Special Instructions to Filing Officer:						
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S. WARREN JUN 2 9 2017

COVER LETTER

TO:	Registration Section Division of Corporations						
CLID	JECT:	A&A Paci	fic Inc.				
SUD	JEC1:	Name	of corporation	- must include suffix			
Dear :	Sir or Madam:						
"Certi	ificate of Existen		of Good Stan	Authorization to Transading" and check are subssin Florida.			
Please Betsy		pondence concern	ing this matter	to the following:			
			Name of	Person			
Fintz	CPA PA						
7301	NW 4th Street, Sui	te 110	Firm/Com	pany			
Planta	ntion, FL 33317		Addre	ess			
betsy(@fintzcpa.com		City/State a	nd Zip code			
		E-mail address	s: (to be used t	or future annual report i	notification)		
For fu	ırther informatior	n concerning this n	natter, please o	eall:			
Betsy Fintz		954 at (440-0320				
	Name of Perso	on	Area Cod	e Daytime Telep	hone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			S:	Registration S Division of Co P.O. Box 632	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee. FL 32314		
Enclo	sed is a check for	r the following am	ount:				
□ \$7	0.00 Filing Fee	S78.75 Filin Certificate		\$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. A&A Pacific Incorporation (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) California, USA (State or country under the law of which it is incorporated) (FEI number, if applicable) September 7, 2010 (Date of duration, if other than perpetual) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

2430 PAVILIONS PLACE LANE UNIT 306, SACRAMENTO, CA 95825

(Principal office address)

2430 PAVILIONS PLACE LANE UNIT 306, SACRAMENTO, CA 95825

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Fintz CPA, PA Name:

Office Address:

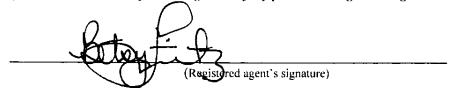
7301 NW 4th Street, Suite 110

Plantation

(City)

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.



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: ____ Address: Vice Chairman: Address: __ Director: _ Address: __ Director: Address: **B. OFFICERS** ALPARSLAN GUNGOR 2430 PAVILIONS PLACE LANE UNIT 306, SACRAMENTO, CA 95825 Address: EMIR ERTUN DUMAN Vice President: 2430 PAVILIONS PLACE LANE UNIT 306, SACRAMENTO, CA 95825 Secretary: Address: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Office The officer or director signing this document (and who is listed in number of above) affirms that the facts stated herein are true and that he or she is aware that false information submitted it a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. **EMIR ERTUN DUMAN**

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

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

A&A PACIFIC INCORPORATION

FILE NUMBER:

C3316953

FORMATION DATE:

09/07/2010

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of May 23, 2017.

ALEX PADILLA
Secretary of State