TO: Qualification/l'ax Lien Section **Division of Corporations** Muzzy's PRoducts The Dear Sir or Madam: The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", 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: John K. MUZZY
(Name of Person) MUZZY'S Products, Inc. 5808 Balcony Dr. STE 105 AUSTIN TX 78731
(City/State/Zip) Should you need to call someone concerning this matter, please call: Tohu K MUZZY at (S12) Y19-9015 (Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section **Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314

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:

• •	(Name of corporation: must include the word "INCORPORATION" or			
	(Name of corporation: must include the word "INCORPORATIO", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)			
2.	(State or country under the law of which it is incorporated) 3. 74-276-7368 (Fill number, if applicable)			
4.	(Date of Incorporation) 5. 2005 (Duration: Year corp. will cease to exist or "perpetual")			
6.	(Date first transacted business in Florida. (Size sections 607,1501, 607,1502, AND 817,155, P.S.)			
7.	Muzzy's Products Inc.			
	ZS CZ			
	5808 BALCONES DR. STE (DS AUSTIN TX #375)			
5808 BACONES DR. STE (D. ST. AUSTIN TX TOTAL) (Current mailing address)				
	(Surious manife address)			
	· ·			
8.	· ·			
	(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)			
	(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT			
	(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)			
	(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)			
	(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) MUZZY'S MUZZY Name: John MUZZY			
	(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)			
	(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) MUZZY'S MIJALES, ILE Name: John MUZZY Office Address: 250 E. falm DR. 576 F-10			
9.	(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) MUZZY'S MUZZY Name: John MUZZY			

(Registered agg its tight; ure)

11. 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 !nw of which it is incorporated.

 Names and addresses of officers and/or directors: (Street address ONLY-1 NOT acceptable) 	2. О. Вох	i.
A. DIRECTORS (Street address only- P. O , Box NOT acceptable.)		
Chairman: John K. Muzzy		
Address: 5808 Balcones DR. STE 105		
Aug Tio Tx 78731		
Vice Chairman:		
Address:		
		
Director:		
Address:		
Director:	<u> </u>	EIV SI
Address:	<u></u> ₩	
B. OFFICERS (Street address only- P. O. Box NOT acceptable)	PH 12:	걸음
President: Tohn K. Muzzy Address: 5808 Balcones Da.	- 1 :0	RAIG
Address: 5808 Balcones Da.		<u></u>
Vice President: $\frac{AVST_{1}D}{(SAML)}$		
Vice President: (5 Amc)	•	
Address:		
		
Secretary: Same		_
Address:	• :	
Treasurer: S Ame] Address:	<u> </u>	
Aduless:		
:		_
NOTE: If necessary, you may attach an addendum to the application listing acousticers and/or directors.	lditional	
1 / 1/2		
13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the app	plication	
	J. Leunon,	
14. Tohal K Muzzy Pras, last (Typed or printed name and capacity/of person signing application)		_



The State of Texas

SECRETARY OF STATE

IT IS HEREBY CERTIFIED, that Articles of Incorporation of

MUZZY'S PRODUCTS, INC. CHARTER NO. 1382955-00

were filed in this office and a certificate of incorporation was issued on **DECEMBER 27, 1995**;

IT IS FURTHER CERTIFIED, that no certificate of dissolution has been issued, and that the corporation is still in existence.

DIVISION OF CORPORATION OF CORPORATI

FILED SECRETARY OF STATE DIVISION OF CORPORATIO



IN TESTIMONY WHEREOF, I have hereunto signed my name officially and caused to be impressed kereon the Seal of State at my office in the City of Austin, on May 9, 1996.

Colt

Antonio O. Garza, Jr. Secretary of State MAC-