F99000004950

To: Registration Section Division of Corporations		
SUBJECT: The Sey Source (Name of corporation	- must include suffix)	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for At "Certificate of Existence", and check are submitted to reg transact business in Florida.	uthorization to Transact Business in Florida", rister the above referenced foreign corporation to	5
Please return all correspondence concerning this matter to	o the following:	ا المائد المفول المائد المفول
Michael Fer (Name of P		
2742 Mari	pany)	•
(Addre	ss)	
<u>Mel bioure</u> F (City/State	Jocida 32940	-
Should you need to call someone concerning this matter,	20002997082 -09/27/9901039 ******87.50 ******	——7 -001 ∗87.50
(Name of Person) at (407 (Area C	Ode & Daytime Telephone Number)	
STREET ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 POR STATION OF STATI	
_ + · · · ·	\$78.75 Filing Fee & 💢 \$87.50 Filing Fee, Certified Copy Certificate of Status Certified Copy	&

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

				9
IN COMPLIANC	E WITH SECTION 607.	1503, FLORIDA STA	ATUTES, THE FOLLOWING IS SUBMIT	TED TO
REGISTER A FO	REIGN CORPORATION	N TO TRANSACT BU	USINESS IN THE STATE OF FLORIDA.	S 22
				13 OF 12
1	he spy Source, =	tnc,		
			D", "COMPANY", "CORPORATION" or	- 35 ST
			indicate that it is a corporation instead of a	30°
natural person o	r partnership if not so con	tained in the name at j	oresent.)	点 突
				9
2. OKLAh	om4		3. 73-/5/1/94/ (FEI number, if applicable)	
(State or country	under the law of which it	is incorporated)	(FEI number, if applicable)	
			00	
4	- 6 - 7 /	5	Peaperus L ation: Year corp. will cease to exist or "per	
(Dat	te of incorporation)	(Dur	ation: Year corp. will cease to exist or 'per	semai")
6	UPON QUALIFIC	ليونه		
(Date first transa	octed business in Florida.	If corporation has not	transacted business in Florida, insert "upon o	ualification.")
(2010 1200 1200			607.1502 and 817.155, F.S.)	,
00.44		4		
7. a. 2742	L MARIAN DRIVE	MelBourne	, FLA 32940 ss)	 .
		-		
b. 2042	2 MARIAN DRIVE	Mel Bourse , 1	FLA 32940.	
<i>U</i>	****	Current mailing addre	ess)	
		Č	•	
<i>~</i>	D	50 COM	سيري	
8	124 AND SALE ELE	Crearic Lyarpar	untry to be carried out in state of Florida)	
(Purpose)	s) or corporation authorize	ed in nome state or co	untry to be carried out in state of Florida)	
9 Name and str	eet address of Florida	registered agent: (f	P.O. Box or Mail Drop Box NOT accepta	able)
				,
Name:	Michael Ferguson	,		
Office Address:	2742 Mariah	Or.		
	MelBourNe	<i>(</i>	, Florida <u>32940</u>	
			(Zip code)	
10. Registered a	gent's acceptance:			
			rocess for the above stated corporation at th	
			agent and agree to act in this capacity. I fu d complete performance of my duties, and l	
	ovisions of all statutes rel igations of my position as		u comptete perjormance of my auties, and I	am jammar waa
una accepi inc ooi				
	1 Ma	5	4	*.*
		Registered agent's sign	nature)	
	' /			
11. Attached is a c	ertificate of existence duly	y authenticated, not m	ore than 90 days prior to delivery of this app	lication 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.

12. Names	and business addresses of officers and/or directors:
A. DIREC	
Chairman:	Michael Fergusen:
Address:	2742 MARIAL DR.
_	MelBourne, FLA. 32940
Vice Cheir	
	nan:
Address: _	9 60
_	
Director:	2 325
	로 ************************************
Address: _	
-	
Director: _	
Address: _	
B. OFFI	CERS
President:	Michael Ferguson
	2742 Mariah Dr.
-	MelBourne, FLA 32940
Vice Presid	lent:
Address: _	
-	January Federal Season
Secretary:	Janni Fea Feaguson
Address:	2742 MARIAN Dr. 32540
-	Melbourne, FIA 32940
Treasurer:	
Address:	
4 7 4441033.	
•	·
NOTE:	f necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. 🔀 🏖	White
f	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. <u>M</u> ,	(Typed or printed name and capacity of person signing application)
	(1 yped or printed name and capacity or person signing apprication)

