F0500000623/

| (Re | questor's Name) | | | |
|-------------------------|-------------------|-------------|--|--|
| (Ad | dress) | | | |
| • | , | | | |
| (Address) | | | | |
| | (0) 1 (7) (0) | - 16 | | |
| (Ci | y/State/Zip/Phone | e#) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | siness Entity Nar | ne) | | |
| _ | | , | | |
| (Do | cument Number) | | | |
| | | | | |
| Certified Copies | _ Certificates | s of Status | | |
| | | | | |
| Special Instructions to | Filing Officer: | | | |
| | | 1 | | |
| | | | | |
| | | | | |
| | | 1 | | |
| | | | | |
| | | | | |

Office Use Only



700054487857

05/31/05--01056--003 **70.00

05 OCT 26 PH 12: 21
SECRE SECRE STATE
ALLAHASSEE, FI ORIDA

M10/21/07-

TRANSMITTAL LETTER

| ~ | ation Section n of Corporations | | | | | |
|---|--|-----------------|---|--|--------------------------------------|--|
| SUBJECT: 1 | nteractive Software Produc | ts Inc. | | | | |
| | | | n - must include suffix |) | | |
| Dear Sir or Mad | am: | | | | | |
| | application by Foreign Con existence," and check are su s in Florida. | | | | | |
| Please return all | correspondence concerning | g this matter | to the following: | | | |
| Vaughn M Duck | | | | | | |
| Interactive Soft | vare Products Inc. | (Name of | Person) | 105-28 | 1672 | |
| THE TACK TO CONT. | , | (Firm/Cor | | <u>-</u> | | |
| 8620 Glenlyon | Court | | | | | |
| | | (Addr | ess) | | PER ST. | - |
| Fort Myers FL 3 | 3912 | | | | | \$ \$ *********************************** |
| | | (City/State a | nd Zip code) | | 200 | i de la constitución de la const |
| For further info | mation concerning this ma | tter, please ca | all: | | PM 12: 21 | |
| Vaughn or Sand | Ira Duck a | t (239 |) 768-9190 | | <u> </u> | |
| (Name | of Person) | (Area C | Code & Daytime Telep | hone Number) |) | |
| Registr Divisio 409 E. Tallaha | TADDRESS: ation Section of Corporations Gaines St. ssee, FL 32399 eck for the following amounts Fee \$78.75 Filing Certificate of | Fee & 🗇 | MAILING A Registration Division of O P.O. Box 632 Tallahassee, \$78.75 Filing Fee & Certified Copy | Section Corporations 27 FL 32314 387.50 Certifi | Filing Fee, cate of Status & ed Copy | ě |



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 9, 2005

VAUGHN M. DUCK INTERACTIVE SOFTWARE PRODUCTS INC. 8620 GLENLYON COURT FORT MYERS. FL 33912

SUBJECT: INTERACTIVE SOFTWARE PRODUCTS INC.

Ref. Number: W05000028672

We have received your document for INTERACTIVE SOFTWARE PRODUCTS INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, pleas call (850) 245-6958.

Lee Rivers Document Specialist

Letter Number: 705A00040581

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 29, 2005

VAUGHN M. DUCK INTERACTIVE SOFTWARE PRODUCTS INC. 8620 GLENLYON COURT FORT MYERS, FL 33912

SUBJECT: INTERACTIVE SOFTWARE PRODUCTS INC.

Ref. Number: W05000028672



We have received your document for INTERACTIVE SOFTWARE PRODUCTS INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

"Certificate of Registration" you submitted is not the same as the certificate we require. Please contact your Secretary of State to obtain the proper certificate, which is described below.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers Document Specialist

Letter Number: 005A00059353

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. Interactive Software Products Inc. | |
|--|--|
| (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORAT "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") | ION," |
| (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transa | acting business in Florida) |
| | |
| | applicable) |
| 4. 10/02/1985 5. | |
| (Date of incorporation) (Duration: Year corp. will cease | se to exist or "perpetual") |
| 6. | |
| (Date first transacted business in Florida, if prior to registration) | |
| | DIMITY) |
| | - F - S - F - S |
| | DE TH |
| | |
| | 至 2 |
| 8. ALTERNATE Bunking | DA A |
| | 'Florida) |
| 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) | |
| Name: Vaughn M. Duck | |
| Office Address: 8620 Glenlyon Court | |
| Fort Myers Florida 33912 | |
| (City) (Zip code) | |
| 10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above state designated in this application, I hereby accept the appointment as registered agent and a further agree to comply with the provisions of all statutes relative to the proper and compand I am familiar with and accept the obligations of my position as registered agent. (Registered agent's signature) | gree to act in this capacity. I plete performance of my duties, \[\left\{ \cdot \sigma \cdot \frac{1}{2} \left\{ \cdot \sigma \frac \sigma \frac{1}{2} \left\{ \cdot \sigma \frac{1}{2} \left\{ \cdo |
| 2. 4. 4. 6. 7. 9. Of Hide fundant | (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORAT "Inc.," "Co.," "Corp." "Inc.," "Co.," "Corp." "Inc.," "Co.," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transa lllinios 3. 36-3391286 (State or country under the law of which it is incorporated) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty lia 1215 30th Street Rockford IL 64.68.68.66.66.66.66.66.66.66.66.66.66.66. |

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. DIRECTORS |
|--|
| Chairman: VAUGHW DUCK ATTN ESP |
| Chairman: VAUGHW DUCK ATTN FSP Address: 2 1215 30th St Rockford, SL G1108 |
| 2704 Browny |
| Vice Chairman: Smlva Duck ATTN 15P |
| Vice Chairman: Spulva Duck ATTN 15P Address: 2704 Bronduny, Rockford, SR 61400 8 |
| Director: |
| Address: |
| FLO IS |
| Director: |
| Address: |
| |
| B. OFFICERS President: VAUCHO DUCK, President Address: 15P - 2704 Browny Rockford, DL 61168 |
| 15P - 2704 Brown Russy Corkford Rt 61168 |
| Address: 101 00000 10000 10000 10000 10000 10000 10000 10000 10000 10000 10000 10000 10000 10000 10000 10000 10000 10000 100000 100000 100000 100000 100000 100000 100000 1000 |
| Vice President: |
| Address: |
| |
| Secretary: SANdVA DUCK |
| Address: 15P - 2704 Bro ADWMY ROCKFORD, DR 61108 |
| Treasurer: SUNDOVA DUCK |
| Address: 15P-2704 Browny, ROCKFOH, DC 6118 |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 13. |
| (Signature of Director or Officer listed in number 12 of the application) |
| 14. UNO EHON M. DUCK President 5/19/05 (Typed or printed name and capacity of person signing application) |
| (1yped or printed name and capacity of person signing application) |



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do





in Iestimony whereof, I hereto set my hand and cause to be affixed the Great Seal of

the State of Illinois, this

day of

OCTOBER

A.D.

2005

Desse White

SECRETARY OF STATE