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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

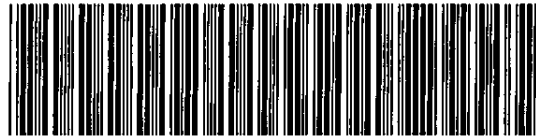
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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# Point **B**

**ASSOCIATIONS**  
...helping companies and industries  
get there faster.

03/15/07

John Schoenewald  
AFSMI, Inc.  
1342 Colonial Blvd, Suite 25  
Fort Myers, FL 33907

*1 copy return to John S*

Dear John,

Enclosed please see Point B, Inc.'s Application for Authorization to Transact Business in Florida. In order to do so, the company must have a registered agent in Florida. Normally this requires nothing more than that you forward any mail addressed to your office in Florida on behalf of Point B, Inc., to our office in San Diego, CA.

A signature signifying your acceptance of this capacity is required on the second page of the enclosed form. If you have any questions, or concerns, in regard to accepting this responsibility, please give me a call.

After signing, please overnight the enclosed checks along with the forms to the physical address for the Division of Corporations listed on the Cover Letter page of the form.

Your assistance in this matter is very much appreciated.

Regards,

*Ginger A West*

Ginger A. West  
Accountant  
Point B, Inc.

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** POINT B, INC  
(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," 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:

GINGER WEST  
(Name of Person)

POINT B, INC  
(Firm/Company)

11031 VIA FRONTERA, SUITE A  
(Address)

SAN DIEGO, CA 92127  
(City/State and Zip code)

For further information concerning this matter, please call:

GINGER WEST at (858) 674 5491 EXT 127  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing 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 & Certificate of Status
- \$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

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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. POINT B, INC  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

AFSMI, INC.  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. CALIFORNIA 3. 33-0866735  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 6/25/1999 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 3/16/2007  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 11031 VIA FRONTERA SUITE A SAN DIEGO, CA 92127  
(Principal office address)

\_\_\_\_\_  
(Current mailing address)

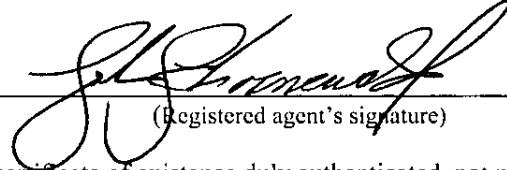
8. PAYING FLORIDA EMPLOYEES  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

Name: JOHN SCHOENEWALD

Office Address: 1342 COLONIAL BLVD, SUITE 25  
FORT MYERS, Florida 33907  
(City) (Zip code)

10. 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.*

  
\_\_\_\_\_  
(Registered agent's signature)

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 law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: WILLIAM F. ROSE

Address: 3635 LAGO SERENO  
ESCONDIDO, CA 92025

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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**B. OFFICERS**

President: JAMES B. WOOD

Address: 16140 MATILISA DRIVE  
LOS GATOS, CA 95030

Vice President: JAMES B. WOOD

Address: 16140 MATILISA DRIVE  
LOS GATOS, CA 95030

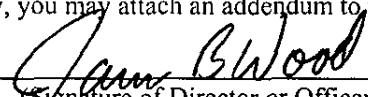
Secretary: WILLIAM F. ROSE

Address: 3635 LAGO SERENO, ESCONDIDO, CA 92025

Treasurer: JAMES B. WOOD

Address: 16140 MATILISA DRIVE, LOS GATOS, CA 95030

**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. JAMES B. WOOD, PRESIDENT/CEO  
(Typed or printed name and capacity of person signing application)

**State of California  
Secretary of State**

**CERTIFICATE OF STATUS  
DOMESTIC CORPORATION**

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

That on the **25th day of JUNE 1999, POINT B, INC.** became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of March 15, 2007.



*Debra Bowen*

**DEBRA BOWEN  
Secretary of State**

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