# F10000000961

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
W10-4472					



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Office Use Only

T. Burch FEB 2 5 2010

### **COVER LETTER**

то:	New Filing Sec Division of Co				
SHR	IECT:	Interactive Resou	rces, Inc.		
300	.Ec	Name of corporat	ion - must include suffix		
Dear S	Sir or Madam:				
"Certi	ficate of Existend	tion by Foreign Corporation to ce," or "Certificate of Good Sign corporation to transact bus	tanding" and check are sub	ct Business in Florida," mitted to register the	
Please	return all corres	pondence concerning this ma	tter to the following:		
		Pat Becker			
		Name	of Person		
		Interactiv	e Resources		
	<u> </u>	Firm/C	Company		
		117 Park Pla	ice		
		Ac	ldress		
		Richmond,	CA 94801		
		City/Stat	e and Zip code		
		pat.be	cker@intres.com		
	<del></del>	E-mail address: (to be us	ed for future annual report	notification)	
For fu	rther information	concerning this matter, please	se call:		
<u>Pa</u>	t Becker	at (_510	<del></del> / <del></del>		
	Name of Perso	on Ar	ea Code & Daytime Teleph	one 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		
Enclo	sed is a check for	r the following amount:			
<b>□</b> \$7	0.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status &	



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

January 28, 2010

PAT BECKER 117 PARK PLACE RICMOND, CA 94801

SUBJECT: INTERACTIVE RESOURCES, INC.

Ref. Number: W1000004472

We have received your document for INTERACTIVE RESOURCES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6928.

Tim Burch Regulatory Specialist II

Letter Number: 810A00002327 TB 24 PB 24 PB

TTI 11 00014

### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE V	VITH SECTION 607.1503, FLORIDA	4 ST	ATUTES, THE FOLLOWING I	S SUBMITTED <sub>-</sub> ŢQ <sub>G</sub> -
REGISTER A FORE	IGN CORPORATION TO TRANSAC	CTB	USINESS IN THE STATE OF F	LORIDA.
				The second
1 Intera	ctive Resources, Inc.			
(Enter name of corr	ctive Resources, Inc. poration; must include "INCORPORAT	ED."	"COMPANY," "CORPORATIO	N,"
"Inc" "Co" "Corr	p," "Inc," "Co," or "Corp.")	,		in the second
,,	,,			(C)
				<del>નું ડ્રે</del>
M / A	Interactive Resource	es,	Inc., of California	and the second
(If name unavailab	le in Florida, enter alternate corporate na	ime a	adopted for the purpose of transact	ing business in Florida)
2Califo	rnia	3.	94-2223210	
(State or country un	rnia der the law of which it is incorporated)		(FEI number, if ap	plicable)
4. 1973		5.	Perpetual	
(Date of	f incorporation)	•	(Duration: Year corp. will cease	to exist or "perpetual")
6. None	yet			
	(Date first transacted busine	ess in	Florida, if prior to registration)	
	(SEE SECTIONS 607.1501 & 60	7.15	02, F.S., to determine penalty liabi	lity)
7. <u>117 Pa</u>	rk Place, Richmond, CA 948	301		
	(Principal office	addr	ess)	
Same_				
	(Current mailing	addr	ess)	
o DF 14c	ense (work) to be done in	Flo	orida by Paul Westerman	ın
	of corporation authorized in home state of			
(ruipose(s)	or corporation authorized in nome state t	лсо	unity to be carried out in state of t	ioriday
9. Name and street	address of Florida registered agent:	(P.O	. Box NOT acceptable)	
Name:	InCorp Services, Inc.			
Name:	Theorp Services, Inc.		<del></del> _	
Office Address:	17888 - 67th Court North	. <del></del>		
	Loxahatchee		, Florida 33470	
	(City)		, Florida 33470 (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	n	D	F	C1	$\Gamma \Omega$	RS
<i>–</i>	.,,	-	•	•		14.7

Chairman:				-
Address:	117 Park Place, Richmond, CA 94801	1-3	201	_
Vice Chairn	nan:		l FEB	- -
			24	Ī
Address	·		PH	-[- []
Director: _	Paul Westermann (partner)		4:4	
	117 Park Place, Richmond, CA 94801			_
Director: _				_
Address:				
B. OFFIC	CERS			_
President: _	Thomas K. Butt, FAIA			
Address: _	117 Park Place, Richmond, CA 94801			_
Vice Preside	ent: Charles Beavers, AIA			_
Address: _	117 Park Place, Richmond, CA 94801			_
Secretary: _	Shirley Butt			-
Address: _	117 Park Place, Richmond, CA 94801			
Treasurer:	Charles Beavers, AIA			_
Address: _	117 Park Place, Richmond, CA 94801			_
<b>NOTE:</b> If	f necessary, you may attach an addendum to the application listing additional officers and/or direct (Signature of Director or Officer listed in number 12 of the application)	tors.		
14	Thomas K. Butt, AIA, President			
14	(Typed or printed name and capacity of person signing application)		·	-

## State of California Secretary of State

A CERTIFICATE OF STATUS

ENTITY NAME:

INTERACTIVE RESOURCES, INC.

FILE NUMBER:

C0689519

FORMATION DATE:

09/19/1973

TYPE:

CALIFORNIA

JURISDICTION: STATUS:

ACTIVE (GOOD STANDING)

DOMESTIC CORPORATION

I, DEBRA BOWEN, Secretary of 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 February 19, 2010.

DEBRA BOWEN
Secretary of State