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Florida Department of State  
Division of Corporations  
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Division of Corporations  
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Account Name : CORPDIRECT AGENTS,  
Account Number : 110450000714  
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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION  
FAZ TECHNOLOGY, INC.

Certificate of Status	0
Certified Copy	1
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June 14, 2012

CORPDIRECT AGENTS, INC.

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

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SUBJECT: FAZ TECHNOLOGY, INC.  
REF: W12000032310

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch  
Regulatory Specialist II

FAX Aud. #: R12000157527  
Letter Number: 612A00016665

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**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. FAZ TECHNOLOGY, INC.**

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

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

**2. Delaware**

(State or country under the law of which it is incorporated)

**3. 45-5465197**

(FBI number, if applicable)

**4. June 11, 2012**

(Date of incorporation)

**5. Perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

**6.**

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

**7. 39/40 Upper Mount Street, Dublin 2, Ireland**

(Principal office address)

**c/o Laura M. Holm, 350 E. Las Olas Blvd., Suite 1600, Ft. Lauderdale, FL 33301**

(Current mailing address)

**8. Performing contract research for the development of intellectual property**

(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: **NRAI Services, Inc.**

Office Address: **515 East Park Avenue**

**Tallahassee**

(City)

**Florida 32301**

(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.*

*Katie Wonsch*

(Registered agent's signature) **Katie Wonsch**

**Assistant Secretary**

**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.**

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

## A. DIRECTORS

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Chairman: Timothy Dee Fritzley

Address: 39/40 Upper Mount Street  
Dublin 2, Ireland

Vice Chairman:

Address:

Director: Eric de Graaff

Address: 39/40 Upper Mount Street  
Dublin 2, Ireland

Director: Ian Jenks

Address: 39/40 Upper Mount Street  
Dublin 2, Ireland

## B. OFFICERS

CEO: Timothy Dee Fritzley

Address: 39/40 Upper Mount Street, Dublin 2, Ireland

Vice President:

Address:

Secretary: Timothy Dee Fritzley

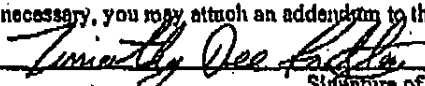
Address: 39/40 Upper Mount Street, Dublin 2, Ireland

Treasurer:

Address:

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.



Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Timothy Dee Fritzley, CEO

(Typed or printed name and capacity of person signing application)

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# Delaware

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*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FAZ TECHNOLOGY, INC." IS DOLY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF JUNE, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FAZ TECHNOLOGY, INC." WAS INCORPORATED ON THE ELEVENTH DAY OF JUNE, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

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12 JUN 13 AM 11:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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You may verify this certificate online  
at [corp.delaware.gov/authwar.shtml](http://corp.delaware.gov/authwar.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 9639221

DATE: 06-13-12

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