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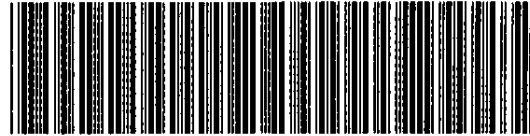
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[Handwritten signature]



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 13, 2014

ANDREEA WILDNER
2060 GOLF VIEW DR.
DUNEDIN, FL 34698

SUBJECT: SPICE PAY NETWORK INC
Ref. Number: W14000002232

We have received your document for SPICE PAY NETWORK INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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) 245-6052.

Maryanne Dickey
Regulatory Specialist II

Letter Number: 614A00000769

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: SPICE PAY NETWORK 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," or "Certificate of Good Standing" 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:

Andreea Wildner

Name of Person

Andreea Inc

Firm/Company

2060 Golf View Dr

Address

Dunedin, FL 34698

City/State and Zip code

andreea@besttaxoffice.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andreea Wildner

Name of Person

at (727) 992-0489

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

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. SPICE PAY NETWORK Inc

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

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

2. Delaware 3. 42-1777995

(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/14/2013 5. perpetual

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

6. 1/1/2014

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

7. 3517 SHERWOOD DRIVE, Largo, FL 33771

(Principal office address)

2060 Golf View Dr, Dunedin, FL 34698

(Current mailing address)

8. any activity or business permitted under the laws of the United States and State of FL

(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: Andreea Inc

Office Address: 2060 Golf View Dr

Dunedin, FL, Florida 34698 (City) (Zip code)

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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.

[Signature] 1/1/2014 (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: Alin Rotaru

Address: SOS Pantelimon, Nr 146, BL. 101, SC 2, AP 51
Bucuresti, Sector 2 Zip 021645, Romania

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Alin Rotaru

Address: SOS Pantelimon, Nr 146, BL. 101, SC 2, AP 51
Bucuresti, Sector 2 Zip 021645, Romania

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: Alin Pop Mircea Alin Pop

Address: 3517 SHERWOOD DRIVE, Largo, FL 33771

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

13. N/A Alin Pop

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. MIRCEA ALIN POP Alin Pop OFFICER 12/27/2013

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

Delaware

PAGE 1

The First State

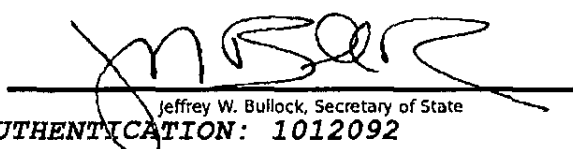
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF INCORPORATION OF "SPICE PAY NETWORK INC", FILED IN THIS OFFICE ON THE FOURTEENTH DAY OF NOVEMBER, A.D. 2013, AT 8:21 O'CLOCK A.M.



5432167 8100

131474954

You may verify this certificate online
at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1012092

DATE: 12-26-13

STATE of DELAWARE
CERTIFICATE of INCORPORATION
of
SPICE PAY NETWORK Inc.
A CLOSE CORPORATION

FIRST: The name of this Corporation is

SPICE PAY NETWORK Inc
(hereinafter the "Corporation")

SECOND: Its Registered Office in the State of Delaware is to be located at 113 Barksdale Professional Center in the City of Newark, County of New Castle. The zip code is 19711. The name of the Registered Agent therein and in charge thereof upon whom process against this Corporation may be served, is Delaware Intercorp, Inc.

THIRD: The nature of the business and the objects and purposes proposed to be transacted, promoted and carried on, are to engage in any lawful act or activity for which corporations may be organized under the General Corporation Law of Delaware.

FOURTH: The total number of shares of stock that the corporation shall have authority to issue is 1,500 shares at \$0.00 par value.

FIFTH: The name and mailing address of the incorporator are as follows:

Name: Delaware Intercorp, Inc.
Mailing Address: 113 Barksdale Professional Center, Newark, DE 19711

SIXTH: All of the corporation's issued stock of all classes, exclusive of treasury shares, shall be represented by certificates and shall be held of record by not more than a specified number of persons, not exceeding 30.

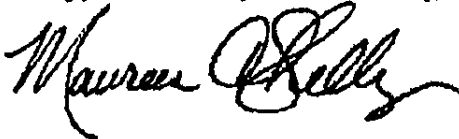
SEVENTH: All of the issued stock of all classes shall be subject to one or more of the restrictions on transfer permitted by Section 202 of the General Corporation Law.

EIGHTH: The Corporation shall make no offering of any of its stock of any class which would constitute a "public offering" within the meaning of the United States Securities Act of 1933, as it may be amended from time to time.

NINTH: The initial director of the Corporation shall be:

Name: ALIN ROTARU
Address: SOS PANTELIMON, NR.148, BL.101
SC.2, AP.51
BUCURESTI, SECTOR 2 021645
ROMANIA

I, The Undersigned, for the purpose of forming a corporation under the laws of the State of Delaware, do make, file and record this Certificate, and do certify that the facts herein stated are true, and I have accordingly hereunto set my hand this Thursday, November 14, 2013.



Incorporator: Delaware Intercorp, Inc. by
Maureen Shelly, Secretary

State of Delaware
Secretary of State
Division of Corporations
Delivered 08:26 AM 11/14/2013
FILED 08:21 AM 11/14/2013
SRV 131306829 - 5432167 FILE

Department of State: Division of Corporations

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Entity Details

File Number: 5432167 **Incorporation Date / Formation Date:** 11/14/2013 (mm/dd/yyyy)

Entity Name: SPICE PAY NETWORK INC

Entity Kind: CORPORATION **Entity Type:** GENERAL

Residency: DOMESTIC **State:** DE

Status: GOOD STANDING **Status Date:** 11/14/2013

REGISTERED AGENT INFORMATION

Name: DELAWARE INTERCORP, INC.

Address: 113 BARKSDALE PROFESSIONAL CTR

City: NEWARK **County:** NEW CASTLE

State: DE **Postal Code:** 197113258

Phone: (302)266-9367

Additional information is available for a fee of \$20.00. This information will include current franchise tax assessment, current filing history and more..

Would you like Tax & History Information

To contact a Delaware Online Agent [click here](#).