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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850)205-8842 Fax Number : (850)878-5368

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FOREIGN PROFIT/NONPROFIT CORPORATION

Aceso Interactive, Inc.

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COVER LETTER

TO:	-	tration Second						
SUBJE		,	NTERACTIVE, IN	iC.				
SODJI			Name	of corporat	ion - m	ist include suffix	***************************************	
Dear Si	r or M	adam:						
"Certifi	cate of	Existence		of Good S	Standing	orization to Transact I " and check are submi Florida.		,
Please r	eturn a	ill corresp	ondence concern	ing this ma	tter to th	ne following:		
CORY	GERBR	ANDT						
·			· · · · · · · · · · · · · · · · · · ·	Name	of Pers	on		
CT COF	RPORA	TION						
-	·,			Firm/C	ompany	,		
2075 CE	ENTRE	POINTE I	BLVD					
				Ad	ldress			
TALLA	HASSE	E, FL 323	08					
				City/Stat	e and Z	p code		
ANGEL	A.GRE	GORY @ A	CESO.COM					
			E-mail address	s: (to be use	ed for fi	ture annual report not	ification)	
For furt	her inf	ormation -	concerning this n	atter, pleas	se call;		201	
CORY GERBRANDT		et (٠ (558-1933		7		
	Name	of Person		Area C	Code	Daytime Telephor	ne Number	Libertonia Property
	Regist Division Clifton 2661 F	ration Second of Corp a Building	porations } Center Circle	S:		MAILING ADI Registration Sect Division of Corp P.O. Box 6327 Tallahassee, FL	ion 35 5 oration 35 2	Ċ
Enclose	d is a c	heck for	the following am	ount:				
□ \$ 70.6	00 Fili	ng Fee	S78.75 Filin Certificate	_		3.75 Filing Fee & Crified Copy	\$87.50 Filing Fee Certificate of Sta 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 TEANSACT BUSINESS IN THE STATE OF FLORIDA.

(If name unavai DELAWARE	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)
(State or count	y under the law of which it is incorporated)	(FEI number, if applicable)
09/15/2011	5.	PERPETUAL
(Date	of incorporation)	(Date of duration, if other than perpetual)
P.O. BOX 1106	WILBRAHAM, MA 01035	
	(Current mails	ng address, if different) O. Box NOT acceptable)
	(Current maili	
Name and stree	(Current mails	O. Box NOT acceptable)
Name and <u>stre</u> Name:	(Current mails et address of Florida registered agent: (P. C T Corporation System	O. Box NOT acceptable)
Name and stree	(Current mails et address of Florida registered agent: (P. C T Corporation System 1200 South Pine Island Road	O. Box NOT acceptable)
Name and stree Name: ice Address: Registere 1 agving been namignated in this ther agree to c	(Current mails et address of Florida registered agent: (P. C T Corporation System 1200 South Pine Island Road Plantation, FL 33324 (City) ent's acceptance: ed as registered agent and to accept serv application, I hereby accept the appoint	O. Box NOT acceptable) , Florida (Zip code) ice of process for the above stated corporation at the pment as registered agent and agree to act in this capacity relative to the proper and complete performance of my of my position as registered agent.

10. 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.

11. Nan	nes and business addresses of officers and/or directors:			
A. DIR	ECTORS			
Chairman	BILL FIEDLER			
Address:	40 WARREN ST. CHARLESTOWN, MA 01095			
Vice Chai	GEOFF FLEDLER		,	
	40 WARREN ST. CHARLESTOWN, MA 01095			
	,			
Director:	JO! IN POLLACK			·· ······
Address:	40 WARREN ST. CHARLESTOWN, MA 01095	····		
Director:	STEVEN SPEAR			·····
	40 WARREN ST. CHARLESTOWN, MA 01095			
	GEOFF FIEDLER 40 WARREN ST. CHARLESTOWN, MA 01095			
Vice President	lent:	34		
	40 WARREN ST. CHARLESTOWN, HA 01095	50	<u>-</u>	
		10 nn		I.
Secretary:		(75.50 (75.51)	5	-
,		in in	À	g d d granta
Treasurer:	BILL FIEDLER	50 S	⇨	
	40 WARREN ST. CHARLES FOWN, MA 01095	75	<u> </u>	
NOTE: 1	f recessary, you may attach an addendum to the application listing additional offi	cers and/or	directo	rs.
The office are true ar a third deg	Signature of Director or Officer or or director signing this document (and who is listed in number 11 above) affirm a different that he or she is aware that false information submitted in a document to the Degree felony as provided for in s.817.155, F.S. M. Babineau, Chief Operating Officer, Access Interactive, Inc.			
	(Typed or printed name and capacity of person signing application))		

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "ACESO INTERACTIVE, INC." IS DULY
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. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BUEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

5038545 8300 SR# 20164429838

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

Jefficey W. Burlings, Sectorary of \$1860

Authentication: 202480313

Date: 06-13-16