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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

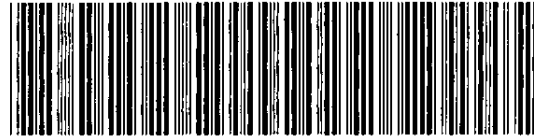
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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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TO: New Filing Section  
Division of Corporations

SUBJECT: TV SHOPPING CHANNEL, 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:

CHRISTY SNOW

(Name of Person)

CORP Co

(Firm/Company)

910 FOULK RD., SUITE 201

(Address)

Wilmington, DE 19803

(City/State and Zip code)

(FEDEX LABEL ENCLOSED)

For further information concerning this matter, please call:

CHRISTY SNOW

(Name of Person)

at (302) 652-4800

(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. **TV SHOPPING CHANNEL, 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**

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

3. **APPLIED FOR**

(FEI number, if applicable)

4. **DECEMBER 23, 2004**

(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. **2300 WEST SAMPLE ROAD, SUITE 212, POMPANO BEACH, FL 33073**

(Principal office address)

**2300 WEST SAMPLE ROAD, SUITE 212, POMPANO BEACH, FL 33073**

(Current mailing address)

8. **Television shopping services and any business not contrary to Florida Law.**

(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: **ARD, SHIRLEY & RUDOLPH, P.A.**

Office Address: **207 WEST PARK AVE., SUITE B**

**TALLAHASSEE**

(City)

, Florida **32301**

(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.*



(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:

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A. DIRECTORS

Chairman: MELIXA MALBERG

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Address: 2300 WEST SAMPLE ROAD, SUITE 212  
POMPANO BEACH, FL 33073

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

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

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

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

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

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

B. OFFICERS

President: MELIXA MALBERG

Address: 2300 WEST SAMPLE ROAD, SUITE 212  
POMPANO BEACH, FL 33073

Vice President: MELIXA MALBERG

Address: 2300 WEST SAMPLE ROAD, SUITE 212  
POMPANO BEACH, FL 33073

Secretary: MELIXA MALBERG

Address: 2300 WEST SAMPLE ROAD, SUITE 212, POMPANO BEACH, FL 33073

Treasurer: MELIXA MALBERG

Address: 2300 WEST SAMPLE ROAD, SUITE 212, POMPANO BEACH, FL 33073

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

13. Melixa Malberg

(Signature of Director or Officer listed in number 12 of the application)

14. MELIXA MALBERG, PRESIDENT

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

# Delaware

PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TV SHOPPING CHANNEL, 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 TWELFTH DAY OF JUNE, A.D. 2008.

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DIVISION OF CORPORATIONS  
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You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6654449

DATE: 06-12-08