

F000000002764⁴

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: LINKMASTERS, 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:

RICK GREENE
(Name of Person)
LINKMASTERS, INC.
(Firm/Company)
109 HANTON AVE. STE. 1
(Address)
WILMINGTON, NC 28403
(City/State/Zip)

W-11471

500003250805--8
-05/12/00--01089--009
*****70.00 *****70.00

Should you need to call someone concerning this matter, please call:

RICK GREENE at (910) 799-9898
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

FILED
00 MAY 12 PM 9:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

4/17
5/17

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

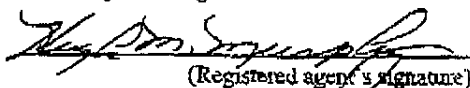
*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. LINKMASTERS, INCORPORATED
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. NORTH CAROLINA
(State or country under the law of which it is incorporated)
3. 56-2175096
(FEI number, if applicable)
4. 12/30/99
(Date of incorporation)
5. PERPETUAL
(Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUALIFICATION
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 109 HINTON AVE. STE 1
WILMINGTON, NC 28403
(Current mailing address)
8. WIRELESS DATA SYSTEMS - INTEGRATION/INSTALLATION
(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 or Mail Drop Box NOT acceptable)
Name: HUGH M. MURPHY
Office Address: 6676 MILLSTONE DR.
NEW PORT RICHEY, Florida, 34655
(Zip code)

FILED
00 MAY 12 PM 9:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: HUGH MURPHY
Address: 6675 MILLSTONE DR.
NEW PORT RICHEY, FL 34655

Vice Chairman: RICK GREENE
Address: 6252 TURTLE HALL DR.
WILMINGTON, NC 28409

Director: _____
Address: _____

Director: _____
Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: RICK GREENE
Address: 6252 TURTLE HALL DR.
WILMINGTON, NC 28409

Vice President: HUGH MURPHY
Address: 6675 MILLSTONE DR.
NEW PORT RICHEY, FL 34655

Secretary: MICHAEL BASS
Address: 109 HINTON AVE. STE 15
WILMINGTON, NC 28403

Treasurer: _____
Address: _____

FILED
00 MAY 12 PM 9:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

13. *RM Lemmer* 4/18/00
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. RM GREENE, VICE CHAIR/ PRESIDENT
(Typed or printed name and capacity of person signing application)

STATE OF NORTH CAROLINA



Department of The
Secretary of State

CERTIFICATE OF EXISTENCE

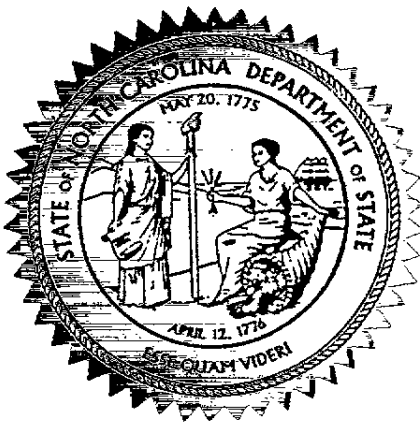
I, **ELAINE F. MARSHALL**, Secretary of State of the State of North Carolina, do hereby certify that

LINKMASTERS, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 30th day of December, 1999, with its period of duration being Perpetual.

I **FURTHER** certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 **has been** delivered to the Secretary of State, and that the said corporation has not filed articles of dissolution as of the date of this certificate.

FILED
00 MAY 22 2000
TALLMASSON
SECRETARY OF STATE



IN WITNESS WHEREOF, I have hereunto
set my hand and affixed my official seal at the
City of Raleigh, this 13th day of April, 2000.

Elaine F. Marshall

Secretary of State