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ACCOUNT NO. : 072100000032

REFERENCE : 735509 7122935

AUTHORIZATION :

Patricia Pizito

COST LIMIT : \$ 70.00

FILED
STATE
DIVISION OF CORPORATIONS
00 JUN 23 PM 2:22

ORDER DATE : June 19, 2000

ORDER TIME : 11:12 AM

ORDER NO. : 735509-005

CUSTOMER NO: 7122935

100003302921--5

CUSTOMER: Ms. Robin Gordon
Law Offices Of Michael Lapat
Suite 311
3300 University Drive
Coral Springs, FL 33065

(Handwritten circle with 'S')

FOREIGN FILINGS

NAME: FLOW MASTER FUND MANAGEMENT,
INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janine Lazzarini

6/23
JK

RECEIVED
00 JUN 23 PM 1:11
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: FLOW MASTER FUND MANAGEMENT, 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:

Michael Lapat, Esq.

(Name of Person)

Law Office of Michael Lapat

(Firm/Company)

3300 University Drive #311

(Address)

Coral Springs, FL 33065

(City/State/Zip)

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

Michael Lapat

(Name of Person)

at (888) 263-4774

(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

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

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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. FLOW MASTER FUND MANAGEMENT, INC.
(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. DELAWARE
(State or country under the law of which it is incorporated)
3. 36-4374126
(FEI number, if applicable)
4. 06/06/00
(Date of incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. 06/06/00
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 3300 University Drive, Suite #311
Coral Springs, FL 33065
(Current mailing address)
8. General Partner of foreign Limited Partnership
(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: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, 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.

Corporation Service Company

By: Sylvia M. White

(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: Mark EpsteinAddress: 1601 W. School Street #202, Chicago, IL 60657Vice Chairman: Michael LapatAddress: 10200 N.W. 19th Street, Coral Springs, FL 33071

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)President: Mark EpsteinAddress: 1601 W. School Street #202, Chicago, IL 60657Vice President: Michael LapatAddress: 10200 N.W. 19th Street, Coral Springs, FL 33071Secretary: Michael LapatAddress: 10200 N.W. 19th Street #202, Chicago, IL 60657Treasurer: Mark EpsteinAddress: 1601 W. School Street #202, Chicago, IL 60657**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.13. Michael Lapat
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)14. Michael Lapat, Vice President

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

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State of Delaware
Office of the Secretary of State

PAGE 1

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "FLOW MASTER FUND MANAGEMENT, 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 NINETEENTH DAY OF
JUNE, A.D. 2000.



Edward J. Freel

Edward J. Freel, Secretary of State

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AUTHENTICATION: 0504872

DATE: 06-19-00