To: Qualification/Ta Division of Cor		¥ ≯ · ≯	
SUBJECT: ASI Tra	ansact.com, Inc.		
	(Name	of corporation - must include suffix)	and the second s
Dear Sir or Madam:			
The enclosed "Application and check are submitted"	on by Foreign Corporation for the contraction for the contraction of t	or Authorization to Transact Business in aced foreign corporation to transact busin	Florida", "Certificate of Existence", ess in Florida.
Please return all correspo	ondence concerning this mat	tter to the following:	
	Stan Hansen, Cl	PA	
		(Name of Person)	
		10	000033823310
		(Firm/Company)	-03/85 /0001133014 *****87.50 *****87.50
	PO Box 338	=.	4444407 (400
		(Address)	w-21927
	Cedar Falls,	IA 50613	
		(City/State/Zip)	
Should you need to call so	omeone concerning this mat	iter, please call:	
Stan Hansen, C	PA	af 319-266-7277	
(Name o	of Person)	(Area Code & Daytime Telephor	ne Number)
STREET ADDRESS:		MAILING ADDRESS	00 OCT SECRET TALLAIL
Qualification/Tax Lien Se Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 Enclosed is a check for the		Qualification/Tax Lien Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Section SSET =
	- ware with a mount.		

☐ \$78.75 Filing Fee &

Certified Copy

X \$87.50 Filing Fee,

Certified Copy

Certificate of Status &

\$70.00 Filing Fee

☐ \$78.75 Filing Fee &

Certificate of Status



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 7, 2000

STAN HANSEN, CPA PO BOX 338 CEDAR FALLS, IA 50613

SUBJECT: ASI TRANSACT.COM, INC.

Ref. Number: W00000021927

We have received your document for ASI TRANSACT.COM, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 487-6097.

Michael Mays Document Specialist

Letter Number: 400A000473681

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. ASI Ti	cansact.com, Inc.	ا م	
. (Name of o	corporation; must include the word "TNCORPOR ATE	D" "COMMANDE "CONTON AND AND AND AND AND AND AND AND AND AN	
		that it is a comporation instead of a natural narrow	
partnership	o if not so contained in the name at present.)	or a natural person or	
2. Pennsy	rlvania		
(State or	country under the law of which it is incorporated)	3. = 23-3035109	<u></u> -
·	- /	(FEI number, if applicable)	
4	March_13, 2000 5	Perp (Duration: Year corp. will cease to exist or "perpetual")	
	(Date of incorporation)	Duration: Year corp. will seem to swint as "	
		(" — and only: will cease to exist or perpetual")	
6	August 1,	2000	
	(Date first transacted business in Florida.) (SEE SEC	ZTIONS 607.1501, 607.1502 and 817.155, F.S.)	<u> </u>
7. 1170 W	1 	• •	
	neeler way	Company of the Control of the Contro	<u> </u>
Langho	rne, PA 19047		
	(Current mailing	g address)	
		- ·	
8. To cond	duct business setting up an int	ternet server	
	(Purpose(s) of corporation authorized in home state of	or country to be carried out in state of Florida)	
9 Name and c			
y, mante and s	treet address of Florida registered agent: (P.O. Box	or Mail Drop Box NOT acceptable)	
Name:	CT Corporation System		
Office Address:	1200 South Pine Island Road		-
	Plantation	Florida 33324	
		Florida, 33324 ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	
,		(Zip code) CATA &	
Registered a	gent's acceptance:	8	
Having hase now	wad as positional and a second	D	
in this application	tied us registered agent and to accept service of proc	ess for the above stated corporation at the place designated	Į
comply with the	orovisions of all statutes relative to the proper and o	ess for the doove stated corporation at the place designated ent and agree to act in this capacity. I further agree to omplete performance of my duties, and I am familiar with	
and accept the ol	bligations of my position as registered agent.	onquete performance of my duties, and I am familiar with	
	_	(1 0 -)	
	James M (Registered agent's	Halpen	
	(Registered agent's	signature)	
11 A44- 7 11		- ************************************	
11. Attached is a	certificate of existence duly authenticated, not more to	than 90 days prior to delivery of this application to the	
of which it is in a	ue, by the Secretary of State or other official having c	sustedy of corporate records in the jurisdiction under the law	

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable) Matthew Cohn 1170 Wheeler Way; Langhorne, PA 19047

Norman Cohn

of which it is incorporated.

1170 Wheeler Way;

Langhorne, PA 19047

	CTORS (Street address only - P.O. Box NCT acceptable) Norman Cohn	* * *
	1170 wheeler Way	ment
	Langhorne, PA 19047	
Vice Chair	man:	<u></u>
Address:		
Director:	Matthew Cohn	
		4 2 4 2 2 4 2 4 2 4 2 4 2 4 2 4 2 4 2 4
-	1170 Wheeler Way Langhorne, PA 19047	
Director:		
Address:		<u> </u>
_		<u> </u>
- R OFFICI	FDC (Compatibility of the DO D. NOT	
	ERS (Street address only - P.O. Box NOT acceptable)	
Address:	The control of the co	<u></u>
	Langhorne PA 19047	
	at Norman com	
	1170 Wheeler Way	<u></u>
	Langhorne PA 19047	(c = PE)-,
	Norman Cohn	
Address:	1170 Wheeler Way	
	Langhorne PA 19047	<u> </u>
reasurer: 1	Norman Cohn	<u> </u>
.ddress: _1	1170 Wheeler Way	<u>- 1</u> 길: 독자 :
<u>_</u> I	Langhorne PA 19047	س محمد دارد <u>ن</u>
OTE: If nec	cessary, you may attach an addendum to the application listing additional officers and/or directors.	- -
3		-
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	 *
. <u>Matthe</u>	Cohn - President VICE CNair man (Typed or printed name and capacity of person signing application)	

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

AUGUST 22, 2000

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT.

ASI TRANSACT.COM INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvanias and remains a subsisting corporation so far as the records of this office

SECHEL COMMO

show, as of the date herein.

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

JZΦM