# F0000005815

#### TRANSMITTAL LETTER

| То       | o: Qualification/Tax Li<br>Division of Corporat   |   |   |  |  |
|----------|---|---|---|--|--|
| · SI     | JBJECT: Con   | DAIS.COM                                    | И   |  |  |
|          | (Name of corporation - must include suffix)   |   |   |  |  |
| De       | ear Sir or Madam:   | ·   |   | MJH  |  |
| "C       |   | nd check are submitted to re                | Authorization to Transact Busesister the above referenced f                                       |  |  |
|          | •   | ence concerning this matter                 | to the following:   | 003210856\$ -04/17/0001095022 *****87.50 *****87.50              |  |
| whs      | s Mielson =   | (Name of                                    | Person)   |  |  |
|          |   | \(\)  | s.com   | W-10410  |  |
|          |   | (Firm/Con                                   | apany)  |  |  |
|          | 2015. Main St. Suite 900  (Address)  Salt Lake City, UT 84111                           |   |   |  |  |
|          | (Address)   |   |   |  |  |
|          | <del></del>   | Salt Lake<br>(City/Stat                     | e City, UT  | 84111  |  |
|          |   | (City/Stat                                  | e/Zip) /  |  |  |
| Sh       | nould you need to call som  Whis Aiel  Lynn Tess  (Name of Person)                      | OP at (801                                  | 321 - 7904<br>321 - 7904<br>554-0757<br>Code & Daytime Telephone N<br>321 - 791                   | lumber) OS                   |  |
| Si       | TREET ADDRESS:  |   | MAILING ADDRESS:  | AM III   |  |
| Di<br>40 | ualification/Tax Lien Sectivision of Corporations D9 E. Gaines St. allahassee, FL 32399 | ion   | Qualification/Tax Lien Sect<br>Division of Corporations<br>P.O. Box 6327<br>Tallahassee, FL 32314 | ion 09   |  |
| Er       | nclosed is a check for the f  | ollowing amount:                            |   | _  |  |
| O        | \$70.00 Filing Fee  | \$78.75 Filing Fee &  Certificate of Status | \$78.75 Filing Fee & Certified Copy   | \$87.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy |  |



### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 20, 2000

LYNN JESSOP 201 S. MAIN ST., STE 900 SALT LAKE CITY, UT 84111

SUBJECT: COMDAIS.COM Ref. Number: W00000010410

We have received your document for COMDAIS.COM and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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

michelle Hodges

Letter Number: 800A00021693

### 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. Com Dais, Com 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. (State or country under the law of which it is incorporated)

4. (Date of incorporation)

3. (FEI number, if applicable)

4. (Date of incorporation)

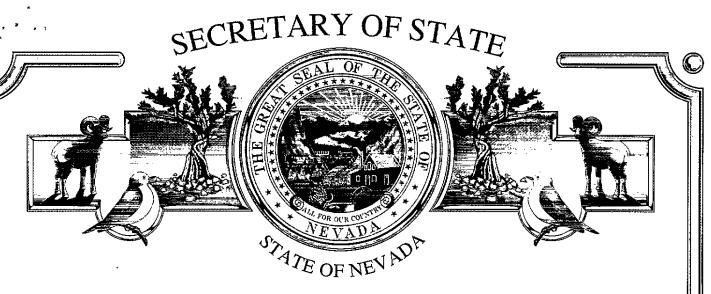
5. (Duration: Year corp. will cease to exist or "perpetual") 4/1/00
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) Salt Lake City, Utah 84/11 Internet e-Commerce
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Lynn JESSOP

Office Address: 5090 Gulf Blvd. St. Pete Beach, Florida, 33706
(Zin 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.

which it is incorporated.

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

| A. DIRECTORS (Street address only - P.O. Box NOT acceptable)  |                     |  |  |  |  |
|---|---------------------|--|--|--|--|
| Chairman: Kim Cooper  |                     |  |  |  |  |
| Address: 715 F. 100 V.  | <del>-</del> -      |  |  |  |  |
| Lindon, UT 94123  |                     |  |  |  |  |
| Vice Chairman:  | - 44                |  |  |  |  |
| Address:  | <del>-</del>        |  |  |  |  |
|   | <del>-</del>        |  |  |  |  |
| Director: Lynn TESSON   | _                   |  |  |  |  |
| Director: Lynn JESSOP<br>Address: 690 N. Fast Capital Street  |                     |  |  |  |  |
| Salt Lake City, Ut 84103  |                     |  |  |  |  |
| Director:   | <b>-</b>            |  |  |  |  |
| Address:  | <del>.</del>        |  |  |  |  |
| Address:  |                     |  |  |  |  |
| B. OFFICERS (Street address only - P.O. Box NOT acceptable)   | <del>-</del>        |  |  |  |  |
| President/cookin Cooper   |                     |  |  |  |  |
| Address: 715 E. 100 N.  | <b>.</b>            |  |  |  |  |
| Lindous, UT 84123   | -                   |  |  |  |  |
| Vice President:   |                     |  |  |  |  |
| Address:  |                     |  |  |  |  |
|   |                     |  |  |  |  |
|   | <del></del> '       |  |  |  |  |
| Secretary:  | <del>-</del> - 1' - |  |  |  |  |
| Address:  | <del>-</del>        |  |  |  |  |
|   |                     |  |  |  |  |
| Treasurer:  | <del>-</del>        |  |  |  |  |
| Address: 690 N. Fast Capital Strict   |                     |  |  |  |  |
| Salt Lake City, UT 84105  | <b>-</b> ,          |  |  |  |  |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. |                     |  |  |  |  |
| 13. Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)                | _                   |  |  |  |  |
|   |                     |  |  |  |  |
| 14. Typed or printed name and capacity of person signing application)   |                     |  |  |  |  |



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **COMDAIS.COM** as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since September 27, 1999, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on August 16, 2000.

Secretary of State

Secretary of State

Certification Clerk