F00000005970

TRANSMITTAL LETTER

Qualification/Tax Lien Section

To:

Divis	ion of Corporations		a.	•
SUBJECT: _	MIXX ONE LTD.	a Delaware	Corporat	in_
50502011	(Name of corp	poration - must include suff	fix) /	
Dear Sir or M				
"Certificate o	"Application by Foreign Corporation Existence", and check are submitted in Florida.	on for Authorization to Tra red to register the above ref	erenced toleign co	rporation
Please return	all correspondence concerning this	matter to the following:	500003: -09/18: ******	\(\text{\text{(10}} \text{(10} \text{(2} \text{(10} \text{(2} \text{(10} \text{(2} \text{(10} \text{(2)} \text{(2)} \text{(2)} \text{(2)}
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	` ,	ame of Person)		
	- MIXX On	e, ∠+≪. rm/Company)		.
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·	1440	IFK Cause	way + 201	.
	M. h.m.:	PA 33141		
-	<u>Mipmi</u>	City/State/Zip)	5 0.0	ro cessor
`		~ \ \	20.00	nd load
Should you r	need to call someone concerning thi	s matter, please call:		. 8-
,	A			 ;
Lucia	no Fontana at (<u>305) 861-1</u> (Area Code & Daytime Te	1630	OO OCT
(Na	me of Person)	(Area Code & Daytime 1e	lephone Number)	
				FILED 25 PA ARY OF
lame 9,3000 Wailability TREET A	DDRESS:	MAILING ADD	RESS:	E PH
		/Qualification/Tax	Lien Section	1: 45 STATE LORID
Qualification of Qualification	n/Tax Lien Section Corporations	Division of Corpo		E S
409 E. Gaine Jacob Tallahassee,	es St.	P.O. Box 6327 Tallahassee, FL	32814× 510	m codo GAVE
المراجع				
Enclosed is	a check for the following amount:		AUTHORIZATIO	N BY PHONE TO
	iling Fee S78.75 Filing Fee & Certificate of Stat		Certific	iling Fee. ate of Status &
W. P. Verifyer	DCC	-,	ter :	d 66
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TRANSMITTAL LETTER

To: Registration Section Division of Corporations	
MIXX DUE LTD.	
SUBJECT: MIXX ONE LTD. (Name of corporation - must include suffix)	· ·
· ·	•
Dear Sir or Madam:	·
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Flor "Certificate of Existence", and check are submitted to register the above referenced foreign corpo transact business in Florida.	ida", ation to
Please return all correspondence concerning this matter to the following:	
Ma ENZA STANCATO	
(Name of Person)	
MR. ENZO STANCATO (Name of Person) MIXX ONE, LTS. (Firm/Company)	
(Eight Company)	—
(Find Company)	
1440 J.F.K. CAUSEWAY (Address)	- .
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$M_{1}AM_{1}$ = L 33141 (City/State/Zip)	
(City/State/Zip)	
in the second se	
Should you need to call someone concerning this matter, please call:	
MR. ENZO STANCATO at 305 P61-1630 (Name of Person) (Area Code & Daytime Telephone Number)	
(Area Code & Daytime Telephone Number)	-
(Name of Person) (Alca Code & Buyuma Tereprena	
STREET ADDRESS: MAYLING ADDRESS:	
Registration Section Registration Section	
Division of Corporations Division of Corporations	
409 E. Gaines St. Tollahassee, FL 37399 Tallahassee, FL 32314	
Tallahassee, FL 32399 Tallahassee, FL 32314	
Enclosed is a check for the following amount:	
S70.00 Filing Fee S78.75 Filing Fee Certificate of Status Certified Copy Certificate Certificate of Status Certified Copy Certificate Certified Copy Certificate Certified Copy Certified	of Status &



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 27, 2000

LUCIANO FONTANA MIXX ONE LTD 1440 JFK CAUSEWAY #201 MIAMI, FL 33141

SUBJECT: MIXX ONE, LTD. Ref. Number: W00000023459

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

You have completed the wrong application for a corporation. The form you have completed is for a limited partnership. Please complete the attached form for a corporation.

A certificate of existence or a certificate of good standing, 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) 487-6913.

Diane Cushing Corporate Specialist

Letter Number: 200A00050769

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. MIXX ONE, LTD. 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)

4. MAY 9, 1995

(Date of incorporation)

5. Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607,1502 and 817.155, F.S.) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) 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.

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:	
A. DIRECTORS	
Chairman: ENZO STANCATO	
Address: 16400 COLLINS AE	
No. MIAMI BEACH, FL 3314,	
Vice Chairman:	
Address:	
Director:	
Address:	<u> </u>
Director:	
Address:	00 SE TALL
	OCT RET AHA
B. OFFICERS	FILED 25 PM ARY OF SSEE, F
President: ENZO STANCATO	OF PA
Address: 16400 COLLINS AUE	
President: ENZO STANCATO Address: 16400 COLLINS AUE NO. MIAMI BEACH FL 33141	D 01
Vice President:	
Address:	
Secretary:	
Address:	
	:
Treasurer:	
Address:	
NOTE: If nongregative you may offeel an added down to the application of the second se	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and	
13. X Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the a	pplication)
14 ENZO STANGATO CHIMAI	

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

State of Delaware Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "MIXX ONE, LTD." 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 FOURTEENTH DAY OF AUGUST,

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MIXX ONE, LTD." WAS INCORPORATED ON THE NINTH DAY OF MAY, A.D. 1995.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

OO OCT 25 PM 1: 46
SECRETARY OF STATE
TALLAHASSEF, FLORIDA

Edward J. Freel, Secretary of State 0618775

AUTHENTICATION:

08-14-00

001411207

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A.D. 2000.