# F00000006180

### TRANSMITTAL LETTER

TO: Registration			
DIVISION OF	Corporations		
SUBJECT:	Pulse-Link, Inc.		
	(Name of corpor	ation - must include suffi	x)
Dear Sir or Madam:			
The enclosed "Appli "Certificate of Existe to transact business i	cation by Foreign Corporation conce", and check are submitted in Florida.	for Authorization to Tran to register the above refe	renced foreign corporation
Please return all corr	espondence concerning this ma	tter to the following:	00 0 SECRE
P	atricia Gullickson		
		of Person)	<u> </u>
P	ulse-Link,Inc.	,	#####################################
<u> </u>		Company)	
<b>.</b>		company)	JIDA 3
	.o. Box 9349	·	+
	(Ac	ldress)	97 Vh
P	anama City Beach,Flo	orida 32417	. 11
	(City/Stat	e and Zip code)	11/6
For further informatic	on concerning this matter, please	e call:	100003445881 -10/31/0001052001 *****78.75 ******78.7
Patricia Gul	tat 1 000	236~6789	
(Name of Per	· · · · · · · · · · · · · · · · · · ·	a Code & Daytime Telepi	hone Number)
STREET ADDRESS Registration Section Division of Corporation 109 E. Gaines St. Fallahassee, FL 32399	ons	MAILING ADDRES Registration Section Division of Corporati P.O. Box 6327 Tallahassee, FL 3231	ons
Enclosed is a check for	r the following amount:		
J \$70.00 Filing Fee	\$78.75 Filing Fee & (Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	<ul> <li>\$87.50 Filing Fee,</li> <li>Certificate of Status &amp;</li> <li>Certified Copy</li> </ul>

#### 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.	Pulse-	-Link, 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.	Delawa	are	3.	59-36	55243						
	(State or countr	y under the law of which it is incorporated	1)		(FEI number, if applical	ole)		—'			
4.	6/30/2	2000	5.	perpe	tual			-			
	(Date	e of incorporation)	_ ~		ar corp. will cease to exist	st or "perpe	tual")	_			
6.	Septen	nber 1,2000									
	(Date first transa	cted business in Florida. If corporation hat (SEE SECTIONS 607	as not .1501,	transacted busin 607.1502 and 8	ess in Florida, insert "up 317.155, F.S.)	on qualifica	tion."	)			
7.	Patric	cia Gullickson				÷					
		(Principal offic	e addr	ess)				-			
	8317 F	ront Beach Rd, Suite 21	Par	nama City	Beach, Florid	a 3240'	7				
		(Current mailin									
8.	Engage	in any lawful act or ac	ctiv	ity		- IS	8	_			
	(Furpose(:	s) of corporation authorized in home state	or cou	intry to be carrie	ed out in state of Florida)	LS:	_				
9.	Name and str	eet address of Florida registered ag	ent: (	(P.O. Box or M	fail Drop Box <u>NOT</u> ac	ceptable)	CT 3				
	Name:	Patricia Gullickson				SEE,	<del>=</del>	П			
Of	ffice Address:	8317 Front Beach Rd, St	iite	21		F STAT	PM 10:	D			
	-	Panama City Beach		, Florida	32407	DA E	37				
		(City)		,	(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.

(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 business addresses of officers and/or directors:

Address:  Director:  Address:  Director:  Address:  B. OFFICERS  President:  John Santhoff  Address:  P-0. Box 9349 Panama City Beach, Plorida 32417  Address:  P-0. Box 9349 Panama City Beach, Florida 32417  Address:  P-0. Box 9349 Panama City Beach, Florida 32417  Address:  P-0. Box 9349 Panama City Beach, Florida 32417  Address:  P-0. Box 9349 Panama City Beach, Florida 32417  NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.  3. Manual Manual City Beach, Florida 32417  Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)  4. John Santhoff	A. DIRECTORS
Vice Chairman:  Address:  Director:  Address:  B. OFFICERS  President:  John Santhoff  Address:  P.O. Box 9349 Panama City Beach, Florida 32417  Vice President:  P.O. Box 9349 Panama City Beach, Florida 32417  Address:  P.O. Box 9349 Panama City Beach, Florida 32417  Address:  P.O. Box 9349 Panama City Beach, Florida 32417  Address:  P.O. Box 9349 Panama City Beach, Florida 32417  Address:  P.O. Box 9349 Panama City Beach, Florida 32417  Address:  P.O. Box 9349 Panama City Beach, Florida 32417  Address:  P.O. Box 9349 Panama City Beach, Florida 32417  Address:  P.O. Box 9349 Panama City Beach, Florida 32417  Address:  P.O. Box 9349 Panama City Beach, Florida 32417  Address:  P.O. Box 9349 Panama City Beach, Florida 32417  Address:  Director:  Address:  Director:  Address:  P.O. Box 9349 Panama City Beach, Florida 32417  Address:  P.O. Box 9349 Panama City Beach, Florida 32417  Address:  P.O. Box 9349 Panama City Beach, Florida 32417  Address:  Director:  Addres	Chairman:
Vice President:  Patricia Gullickson  Problems:  Probl	Address:
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(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)  John Santhoff	NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
4. John Santhoff	
	(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 "PULSE-LINK, 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 OCTOBER, A.D. 2000.

00 OCT 31 PM IO: 37
SECRETARY OF STATE
TAIL AHASSEE ELOBIDA

Edward J. Freel, Secretary of State

AUTHENTICATION: 0744277

DATE: 10-19-00

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