F00000000467

TO: Registration Section Division of Corpora	ations		•	
SUBJECT:	(Name of corporati	INTERACT	TIVE, INC	2
Dear Sir or Madam: 00	855-0064	7-00471	MUH	
The enclosed "Application "Certificate of Existence", a to transact business in Flori	and check are submitted to	or Authorization to Trans o register the above refere	act Business in Flori enced foreign corpor	ida", ration
Please return all correspond	lence concerning this matt	ter to the following:		
Z	SROOKE R. (Name	WEISLED	ER	
	(Name	of Person)		
U	JEISLEDER	INTER ACTI	VE, INC	
	(Firm/C	Company)	·	
<i>5</i> 3	TARPON LA	ANE OR	<u> </u>	
	(Ad	ldress)		
KE	Y LARGO, A	FLORIDA	33037	
	(City/Stat	te and Zip code)	W-26	856
For further information co	ncerning this matter, pleas	ee call:	40000345 -11/06/00 *****87.	53 744 !)01123008 50 *****87.5
Brooke R. We (Name of Person)	cisle devat (30	5, 367-22	206	
(Name of Person)	(Are	ea Code & Daytime Telep	phone Number)	0 5
				BECRETA DIVISION OF OO NOV 1
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399		MAILING ADDRE Registration Section Division of Corpora P.O. Box 6327 Tallahassee, FL 32	i tions	RETARY OF STATE A OF CORPORATIONS N 16 AM 9: 55
Enclosed is a check for th	e following amount:			
☐ \$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filin Certificate Certified C	of Status &



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

November 9, 2000

BROOKE R. WEISLEDER WEISLEDER INTERACTIVE, INC. 53 TARPON LANE ORC KEY LARGO, FL 33037

SUBJECT: WEISLEDER INTERACTIVE, INC.

Ref. Number: W00000026856

We have received your document for WEISLEDER INTERACTIVE, INC. 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 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) 487-6967.

Michelle Hodges Document Specialist

Letter Number: 600A00058066

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. WEISLEDER TNTER ACTIVE, TNE.

1	WEISLEDER TNTER ACTIVE, TNE. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or
1.	words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a
2.	The state of country under the law of which it is incorporated) The state of country under the law of which it is incorporated) The state of country under the law of which it is incorporated) The state of country under the law of which it is incorporated)
4.	(State of country under the law of which
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6.	(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.)
7.	53 TARPON LANE ORC KEYLArgo FL 3303
	(Principal office address) 53 TARPON LANE ORC KEY LARGO, FL 33037 (Current mailing address)
8.	(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: BROOKE R. WEISLEDER
0	office Address: 53 TARPON LANE ORC
	KEY LARGO, Florida 33037 (City) (Zip code) STATE
H de fr	O. Registered agent's acceptance: Iaving been named as registered agent and to accept service of process for the above stated corporation at the place esignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I wither agree to comply with the provisions of all statutes relative to the proper and complete performance of my uties, 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:

2	
A. DIRECTOR	is a laler of EDFR
Chairman:	Brooke B. WEISLEDER
Address:	53 TARPON LANE ORC
<u></u>	KEY LARGO, FLORIDA 33037
Vice Chairman:	TRAVIS B. WEISLEDER
Address:	13 Appleby STREET 13 Appleby STREET 13 TSLAND 02840
	Newport, Rhode Island 02840
Director:	
Address:	
Director:	
Address:	
B. OFFICER	
	D WESTERE
President:	- and the ORE
Address:	Key LArgo, FL 33037
	
Vice President:	10 0 10/ STREET
Address:	13 Appleby Street New port, Rhode Island 02840
	Dew port Rasse from
Secretary:	ES TON DON LAVE ORC Key LANGO FL 3303
Address:	33 TARPON CARE CALL REGISTRE
Treasurer:	TrAvis B. Weisteser Newport RI 02840
Address:	53 FAT 13 HPPLEBY ST. NEWPOH 14
	ecessary, you may attach an addendum to the application listing additional officers and/or directors.
NOTE: If n	ecessary, you may attach an addenum to the approximation of the approxim
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
	ZING R WEISLEDER PRESIDENT
14	(Typed or printed name and capacity of person signing application)

State of Delaware

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Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "WEISLEDER INTERACTIVE, 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 TWENTY-THIRD DAY OF

OCTOBER, A.D. 2000.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

Edward J. Freel, Secretary of State

AUTHENTICATION: 0748215

DATE: 10-23-00

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