## FOI 0000001761

SUBJECT: E-PAWN.	com, INC.
	f corporation - must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corp 'Certificate of Existence", and check are sulto transact business in Florida.	oration for Authorization to Transact Business in Florida", bmitted to register the above referenced foreign corporation
Please return all correspondence concerning	g this matter to the following: 000039300 -03/29/01011 *****87.50 *
V LIVIS I FELS I FILL	(Name of Person)
JENNIFER MA	1C.
-	(Firm/Company)
1744 COLONIAL	ORIVE
,	(Address)
OURAL SPRINGS	, FL 3307/ (City/State and Zip code)
,	City/state and Zip code/
For further information concerning this mat	ter, please call: 무슨 등
TENNIFER MARTIN at (Name of Person)	(954) 227-5928
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
409 E. Gaines St.	P.O. Box 6327
Tallahassee, FL 32399	Tallahassee, FL 32314
Enclosed is a check for the following amou	int:
□ \$70.00 Filing Fee □ \$78.75 Filing I Certificate of	

ENVELOPE - THANK YOW

## 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.	E-PAWN. 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.	NEVADA 387.0435741
	(State or country under the law of which it is incorporated) (FEI number, if applicable)
4	11/4/85 S DERPHILL
••	(Date of incorporation)  5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")
_	
6.	(POLO FIRST TOURSONS OF FLORIDA VE
	(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.	2855 UNIVERSITY DRIVE, SUITE 200
	(Principal office address)
	CORAL SPRINGS FLORIDA 33065
	(Current mailing address)
8.	MAIN OFFICE · SOFTWARE AWEBSITE-
	(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: JENNIFER MARTIN
~	
UI	fice Address: 1744 BOLONIAL DRIVE
	CORAL SPRINGS, Florida 3307/ (Zip code)
	, , , , , , , , , , , , , , , , , , ,

## 10. Registered agent's acceptance:

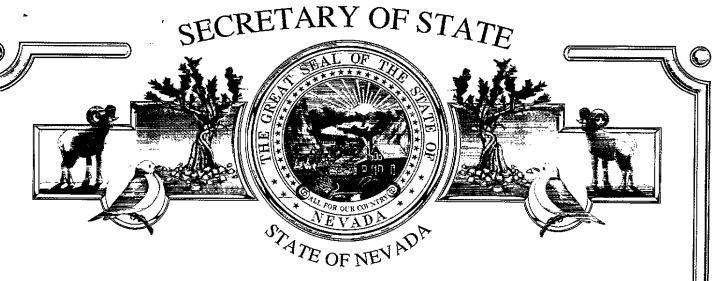
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative 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:	
A. DIRECTORS	-
Chairman: EDWARD O. RIES	
Address: 2855 UNIVERSITY DRIVE STE 200	
CORAL SPRINGS, FL 33065	
Vice Chairman: $\sqrt{A}$	
Address:	para,
Director: ALISON MADET	
Address: <u>ASSS</u> UNIVERSITY OR. STE 200	
ODEAL SPRINGS, FL 33065	
Director:	
Address:	
B. OFFICERS	
President: EDUARO O. BIES	
Address: 2855 UNIVERSITY ORIVE STE 200	
CORAL SPRINGS, FL 33065	
Vice President:	
Address:	
	7 29 7 29
Secretary: JENNIFER MARTIN	
Secretary: TENNIFER MARTIN  1744 COLONIAL DRIVE  Address: CORAL SPRINGS, PL 33071	93 6
Treasurer:	इंग्
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional office	rs and/or directors.
13. SECRET	ARY
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of	the application)
14 JENNIFIER MARTIN	

(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, and limited-liability partnerships 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, **E-PAWN.COM INC.** 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 **NOVEMBER 04, 1985**, 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 Las Vegas, Nevada, on MARCH 22, 2001.

Secretary of State

Certification Clerk