F0200000434

TRANSMITTAL LETTER

Division of Corp				
subject: P	(Name of corporation	on - must include suffix)		
Dear Sir or Madam:				
The enclosed "Applicati "Certificate of Existence to transact business in Fl	on by Foreign Corporation for e", and check are submitted to lorida.	Authorization to Transact I register the above reference	Business in Florida", d foreign corporation	
Please return all correspond	ondence concerning this matte			
James Angelakis 1000047937015				
	(Name of	•	******78.75 *****78.75	
Prevail Online, Inc.				
~ Q ~ \	(Firm/Co			
501 Brickell KEY Drive Suite 603				
(Address)				
Miani FL 33131				
(City/State and Zip code)				
For further information of	concerning this matter, please o	eall:		
•				
James angelakis (305) 374 2082				
(Name of Person	(Area (Code & Daytime Telephone	Number) $\frac{1}{2}$ 8	
			FS	
STREET ADDRESS:		MAYING ADDRESS.	JAN :	
Registration Section		MAILING ADDRESS: Registration Section	24 SSE	
Division of Corporations		Division of Corporations		
409 E. Gaines St.		P.O. Box 6327		
Tallahassee, FL 32399	• •	Tallahassee, FL 32314		
Enclosed is a check for the following amount:				
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & 1/2 F Certified Copy	

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. Prevail Online 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	
natural person or partnership if not so contained in the name at present.) 2. Colorco USC 3. 94 - 3335711	
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. 21 day of July 1909 5 DERDELLAI	
(Date of incorporation) (Duration: Year corp. will cease to exist or "pe	erpetual")
6. Lau Of January 2002	
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qual (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	ification.")
7. 501 BRICKELL KEY DRIVE Suite has	
501 Brichell KEY Drive Suite 603	 !
The purpose of the componention is to engage in any and all in which componentions may engage in the state under whom to the state under who the state of components to be under the state under who the state of components to be under the state of the	lawful business
(Purpose(s) of composition and initialians	
resident monte state of 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)	le)
Name: Bryan abboud	
Office Address: 501 BRICKELL KEY DRIVE, Suite 603	o O
	7 N) ;
(City) (Zip code)	₹ m
0. Registered agent's acceptance:	24
laving been named as registered agent and to account service of the service of th	n al The ribre
esignated in this application, I hereby accept the appointment as registered agent and agree to act in- further agree to comply with the provisions of all statutes relative to the	h uzate piace his capacity. I
urther agree to comply with the provisions of all statutes relative to the proper and complete performa uties, and I am familiar with and accept the obligations of my position as registered agent.	nce of my
decept the obligations of my position as registered agent.	ယ
(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: 13Ryan KEY DRIVE, Suite 603 Vice Chairman: _ Address: _ Director: Address: _ Director: _ Address: _ **B. OFFICERS** President: Address: Vice President: Address: seo Cielo Tucson Treasurer: _ Address:

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)



DEPARTMENT OF STATE CERTIFICATE

I, DONETTA DAVIDSON, Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

PREVAIL ONLINE, INC. (Colorado CORPORATION) File # 19991136937

was filed in this office on July 21, 1999 and has complied with the applicable provisions of the laws of the State of Colorado and on this date is in good standing and authorized and competent to transact business or to conduct its affairs within this state.

Dated: December 14, 2001

For Validation:

Certificate ID: 524005

To validate this certificate, visit the following coweb site, enter this certificate ID, them follow the instructions displayed.

Vonetta Davidson SECRETARY OF STATE