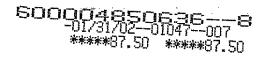
# F02000000613

B2B=XIVE

B2B-Hive, LLC 821 Broadway, 2nd Floor New York, NY 10003

City/State/Zip

Phone #



Office Use Only

**Examiner's Initials** 

### CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1	
(Corporation Name)	(Document #)
2(Corporation Name)	(Document #)
3(Corporation Name)	(Document #)
4(Corporation Name)	(Document #)
□ Walk in □ Pick up time   □ Mail out □ Will wait	Certified Copy  Photocopy  Certificate of Status
NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other  OTHER FILINGS	AMENDMENTS  Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger  REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	REGISTRATION/QUALIFICATION  Foreign Limited Partnership Reinstatement Trademark Other  2/5

CR2E031(7/97)

#### TRANSMITTAL LETTER

TO:	Registration S Division of Co								
SUBJ	ECT:	CouchPak,	Inc.						
	<del></del>	(N	ame of corp	oration ·	must include	suffix)			•
Dear S	sir or Madam:								
"Certif	iclosed "Application of Existen sact business in	ce", and check	n Corporatio are submitte	on for Au ed to reg	thorization to ister the above	Transact reference	Business in Flor ed foreign corpo	ida", ration	
Please	return all corres	spondence conc	erning this	matter to	the following	;:			
	(	Chris Kne	pler						
			(Na	me of Pe	erson)				
	7	CouchPak,	Inc.						
			(Fir	m/Comp	any)	· · · · · ·		<u> </u>	
	(	09 Green	wich St	., 40					
				(Address	s)	-		<del>.:                                    </del>	•
	ľ	New York,	NY 100	14					
			(City/S	State and	Zip code)		TA	<del>2</del>	
For fur	ther information	1 concerning th	is matter, pl	ease call	:			2 JAN 31	
Chr	is Knepler			212 )	905-17		<u> </u>		
	(Name of Pers	son)	(,	Area Co	le & Daytime	Telephon	e Number)	7: 54	_
Registr Divisio 409 E.	ET ADDRESS: ration Section on of Corporatio Gaines St. assee, FL 32399	ns		F F	LAILING AD Legistration Se Division of Cor LO. Box 6327 Callahassee, FI	ction porations			
Enclos	ed is a check for	the following	amount:						
□ \$70	.00 Filing Fee	S78.75 F	lling Fee & te of Status		78.75 Filing Fortified Copy	ee & X	CK \$87.50 Filing Certificate o Certified Co	f Status	&

## 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.	TouchPak, 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 3 562132208
	(State or country under the law of which it is incorporated) (FEI number, if applicable)
4.	) 14/ A
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6.	Upon Qualification
	(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	609 Greenwich St., 4C, New York, NY 10014
	(Principal office address)
	609 Greenwich St., 4C, New York, NY 10014
	(Current mailing address)
8.	Customer sales and support.
	(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) $\omega$
	Name: Dayna Garrison
Of	ffice Address: 4680 Oakcreek St. Apt 112
	Orlando 32835
	(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:

A. DIRECTORS		
Chairman:	Chun Wei (Evan) Chen	1 [8
Address:	609 Greenwich St., 4C	
	New York, NY 10014	11-12
Vice Chairman:	Richard Marin	var in
Address:	821 Broadway, 2nd fl.	<u>; =</u> _
	New York, NY 10003	· E
Director:	Bruce Tully	
Address:	821—Broadway, 2nd fl.	-
	New York, NY 10003	
Director:	<u>Kai Tao</u>	
Address:	237 Park Avenue	·. :
	New York, NY 10017	- • <u>, , , , , , , , , , , , , , , , , , </u>
B. OFFICERS		
President:	Chun Wei (Evan) Chen	<u> </u>
Address:	609 Greenwich St., 4C	<del>.</del> ,
	New York, NY 10014	
Vice President:	Chris Knepler	-, . <u>.</u> .
Address:	1.0	
	New York, NY 10014	
Secretary:	Chris Knepler	
Address:	New York, NY 10014	<del>-</del>
Treasurer:	Chris Knepler	- <del>-</del> -
Address:	New York, NY 10014	
	ssary, 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	Chief Operating Officer  (Typed or printed name and capacity of person signing application)	
	(Typed or printed name and capacity of person signing application)	

## State of Delaware Office of the Secretary of State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TOUCHPAK, 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 NINTH DAY OF NOVEMBER, A.D. 2001.

02 JAN 31 PH 7: 55
SECRETARY OF STATE



Warriet Smith Windson, Secretary of State

AUTHENTICATION: 1439701

DATE: 11-09-01

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