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#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Crosshorizons, Inc.	
	tion - must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to transact business in Florida.	
Please return all correspondence concerning this mat-	tter to the following:
Alejandro Payan	
(Name	of Person)
Crosshorizons, Inc.	en e
(Firm/C	Company)
848 Brickell Avenue Suite 1116	
(Ad	idress)
Miami, FL 33131	
(City/State	te and Zip code)
	te and Zip code)
For further information concerning this matter, please	e call:
Raul Incera at ( 305	377-9224
	a Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 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 & \$ \$87.50 Filing Fee, Certified Copy Certificate of Status & 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. Crosshoria	zons, inc.						
words or abbrev	oration; must include the word "INCORPORA viations of like import in language as will cle or partnership if not so contained in the name	arly in	dicate that it is a corporation instead of a				
2. Delaware		3. (	03-0519217				
	y under the law of which it is incorporated)	· • · · —	(FEI number, if applicable)				
4. May 27,	2003	5.	Perpetual	_			
(Dat	te of incorporation)	(1	Duration: Year corp, will cease to exist or "perpe-	tual")			
6. Upon qua	alification						
(Date first transa			nsacted business in Florida, insert "upon qualifica 07.1502 and 817.155, F.S.)	ation.")			
<sub>7.</sub> 848 Brick	cell Avenue Suite 1116						
	(Principal office a	addres	s)				
848 Brick	cell Avenue Suite 1116						
Engage in	(Current mailing a any lawful act or activity for which			D3 JUL - 1 AM 10: 54			
(Purpose	(s) of corporation authorized in home state or	r count	ry to be carried out in state of Florida)				
9 Name and str	reet address of Florida registered agen	ıt: (P	O. Box or Mail Drop Box NOT acceptable)	200			
Name:	Alejandro Payan	(-	,				
Office Address:	848 Brickell Avenue Suite 1116		<u> </u>	+ 3			
	Miami		, Florida				
	(City)		(Zip code)	-			
Having been nat designated in thi further agree to	is application, I hereby accept the appoi	intme es rela	of process for the above stated corporation nt as registered agent and agree to act in the utive to the proper and complete performand ny position as registered agent.	is capacity. I			
-	(Registered agent	's sign	ature)				
	` •	_	-				

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. DIKI	actors —							
Chairman	n. Alejandro Payan	v. * ·	_!	<u> </u>				7
Address:	848 Brickell Avenue Suite 1116		_	<b>*</b>	<i>"</i>	. •	42**	
	Miami, Florida 33131		;			:		
Vice Chai	airman:		<u>.</u>	<i>j</i>	·	_ <del></del> :	<u> </u>	· <u>·</u>
Address:	:	ME		1 A 1	,	·. ———		L.
_		*.5	<u> </u>	*.3	. •		, i	ـ: - ب <sub>ا</sub> ت ــــــــــــــــــــــــــــــــــــ
Director:	Jorge del Barco Licona		11				<u>.</u>	
Address:	Edificio Oficinas del Parque, Blvrd, Diaz Orda	z 140. To	orre 2	Piso 18	<u>-</u>	<u></u>	<u>, u</u>	<u>تة: ي</u> ي
	Col. Santa Maria. Monterrey, N.L. Mexico 646	50	- 7-1		3 4			
Director:	Hector Ortiz Gomez	7 -					<del></del>	
Address:	Edificia Oficinas del Barque Blund Diez Orde	z 140. To	orre 2	Piso 18	emerim 17	Ü	3 2	25
	Col. Santa Maria, Monterrey, N.L. Mexico 646	650			Specific			記点
B. OFFI	TICEDS							CS CS
President:	Mojandra Payon		ì				至百	- 93.5 - 93.5 - 93.5
Address:	2045 Indianana Arabia			.a.	,	* * :	<u>1</u> 2	OHS
rsumess.	Miami, Florida 33133		مان المان الم					
Sian Dunni	sident:			<del></del>				<del></del>
			- 1 -				,	
Address: .				<u> </u>	<u> </u>		- 33. ·	<u></u> '
,	Jorge del Barco Licona	<u>-</u>	<u></u>			*	<del></del> ,	
Secretary:	Divid Dia Orda 440 Tama 2 Dia 49 Cal C	anta Ma	ria M	onterrev	NI Mex	cico 64	<u>\$</u> .650	
Address: .			1100	ornor (oy)	14.2.770	1100 04	<u> </u>	
Freasurer:	r:		1		<del>`</del>			<del></del>
Address: .	<u> </u>		-∦-	<del></del>	<del></del>			<del></del>
NOTE:	If necessary, you may attach an addendum to the applica	ation tistin	gaddit	ional offic	ers and/or d	lirectors	š.	
13.	Maya	AIKM						<del>-r</del>
	(Signature of Chairman, Vice Chairman, or any							<del></del> -
14. <u>Al</u>	Alejandro Payan, acting as President and Jorge		<u> </u>		g as Seci	etary		
	(Typed or printed name and capacity of r	erson sign	ning ap	plication)				

## ADDENDUM 1 TO APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

#### 1. ADDITIONAL OFFICER:

Name: Hector Ortiz Gomez

Address: Edificio Oficinas del Parque. Blvrd. Diaz Ordaz 140. Torre 2 Piso 18

Col. Santa Maria. Monterrey, N.L. Mexico 64650

Office: Near-shore Operations Officer

DIVISION OF CORPORTATIONS

DIVISION OF THE CORPORTATIONS

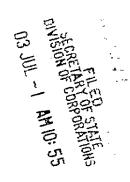
DIVISION OF THE CORPORTATIONS

# Delaware

The First State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CROSSHORIZONS, 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 EIGHTEENTH DAY OF JUNE, A.D. 2003.





Varriet Smith Hindson

Harriet Smith Windsor, Secretary of State

3660032 8300 AUTHENTICATION: 2481692

DATE: 06-18-03