

**F03 000003643**

Florida Department of State  
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Account Name : C T CORPORATION SYSTEM  
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**FOREIGN PROFIT QUALIFICATION**

Zone Center, Inc.

Certificate of Status	0
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DIVISION OF CORPORATIONS

**F03-3643**  
*OK*

**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. Zona Center, 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  
(State or country under the law of which it is incorporated)
3. Applied for  
(FEI number, if applicable)
4. July 21, 2003  
(Date of incorporation)
5. Perpetual  
(Duration: Year corp. will cease to exist or "perpetual")
6. Upon filing  
(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. 6278 N. Federal Hwy., Suite 456, Fort Lauderdale, FL 33308  
(Principal office address)  
6278 N. Federal Hwy., Suite 456, Fort Lauderdale, FL 33308  
(Current mailing address)
8. Online meal consultation  
(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: Troy D. Sutter  
Office Address: 6278 N. Federal Hwy., Suite 456  
Fort Lauderdale, Florida 33308  
(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.*

By:   
(Registered agent's signature)  
Troy D. Sutter

**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: Troy D. SutterAddress: 6278 N. Federal Hwy., Suite 456Fort Lauderdale, FL 33308

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**President: Troy D. SutterAddress: 6278 N. Federal Hwy., Suite 456Fort Lauderdale, FL 33308

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

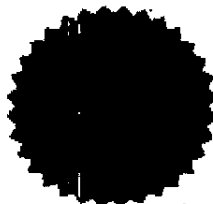
Secretary: Troy D. SutterAddress: 6278 N. Federal Hwy., Suite 456, Fort Lauderdale, FL 33308Treasurer: Troy D. SutterAddress: 6278 N. Federal Hwy., Suite 456, Fort Lauderdale, FL 33308**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.13. See Below Please  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)14. Troy D. Sutter, President  
(Typed or printed name and capacity of person signing application)

# Delaware

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*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ZONE CENTER, 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-FIRST DAY OF JULY, A.D. 2003.



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 2538289

DATE: 07-21-03

TOTAL P.04