FU3000004908

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ie)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



700023474287

MC

RECEIVED

03 OCT - 1 AM 10: 25

DEFANCE STATE
DYSION OF CEPORATIONS





UCC FILING & SEARCH SERVICES, INC. 526 East Park Avenue Tallahassee, Florida 32301 (850) 681-6528

HOLD FOR PICKUP BY **UCC SERVICES** OFFICE USE ONLY

SERVICES	CO Epixtar Fina		NAM	IE (S) AND DOCU	MENT NUMBER
Filing Evidence Plain/Confirmation	n Copy			Type of Docum Certificate of Sta	
☑ Certified Copy			Ø	Certificate of Go	od Standing
		\supset		Articles Only	
Retrieval Reque	st			All Charter Docu Articles & Amer Fictitious Name	
☐ Certified Copy				Other	
NEW FILINGS	<u> </u>	AMENDMENT	S		
Profit		Amendment			
Non Profit		Resignation of R	A 0	fficer/Director	
Limited Liability		Change of Regis	tered	Agent	
Domestication		Dissolution/With	drav	val	
Other		Merger			
			-		-
OTHER FILINGS		REGISTRATIO	N/QI	JALIFICATION	
Annual Reports	X	Foreign			
Fictitious Name		Limited Liability			
Name Reservation		Reinstatement			
Reinstatement		Trademark			_
		Other			

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

NY," "CORPORATION,"
4
he purpose of transacting business in Florida)
-0561470
(FEI number, if applicable)
ipetial
Year corp. will cease to exist or "perpetual")
ousiness in Florida, insert "upon qualification.") nd 817,155, F.S.)
Miami FL 33181
Mami FL 33181
vity for which corporations no carried out in state of Florida)
carried out in state of Florida)
or Mail Drop Box NOT acceptable)
ida 3318 (Zip code)

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. Diķec	TORS
Chairman:	
Address: _	
Vice Chair	nan:
Address: _	
_	
Director: _	Debovah Gambone
Address: _	11900 Biscaque Blud #262
_	Mrami FL 33181
Director:	
•	
B. OFFI	
	William D. Rhodes, Jr.
President:	11000 Bo and DI Pol 2/2)
	11900 Bisagne Blid#262
	Mami FL 33181
Vice Presi	dent:
Address:	
	Deborah Gambone
Address:	11900 Biscagne Blud #262, Mrami FL 33181
Treasurer	
Address:	THE STATE OF THE S
NOTE.	If necessary, you may attach an addendum to the application listing additional officers and/or directors.
	Thecessary, you may attach an authoritin to the application risting auditional officers and/or directors.
13	(Signature of Director of Officer listed in number 12 of the application)
1.4	DEBORAH GAMBONE SECRETARY
14	(Typed or printed name and capacity of person signing application)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EPIXTAR FINANCIAL CORP." 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-NINTH DAY OF SEPTEMBER, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EPIXTAR FINANCIAL CORP." WAS INCORPORATED ON THE TWENTY-FOURTH DAY OF JULY, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.



3685100 8300

Warriet Smith Hindson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 2660813

030625550 DATE: 09-29-03 ----