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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

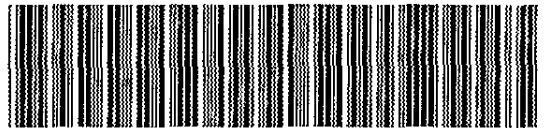
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TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: UZIT SERVICES INC
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

W LEE
(Name of Person)
UZIT SERVICES INC
(Firm/Company)
11916 SE 171 Loop
(Address)
Summerfield FL 34491
(City/State and Zip code)

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For further information concerning this matter, please call:

WENDELL LEE at (321) 228 8592
(Name of Person) (Area 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 & Certified Copy ☒ \$87.50 Filing Fee, 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. UZIT SERVICES 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. New Jersey 3. 22-360 2520
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 08/25/1998 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 10/01/03
(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. 11916 SE 171 Loop Summerfield FL 34491
(Principal office address)
11916 SE 171 Loop Summerfield FL 34491
(Current mailing address)

8. Business Consulting Services
(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: WENDELL LEE

Office Address: 11916 SE 171 Loop
Summerfield, Florida 34491
(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.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: W LEE

Address: 11916 SE 171 Loop
Summerfield FL 34491

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: W LEE

Address: 11916 SE 171 Loop
Summerfield FL 34491

Vice President: _____

Address: _____

Secretary: W LEE

Address: _____

Treasurer: W LEE

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. W Lee
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. WENDELL LEE
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE FLORIDA

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned WENDELL LEE, do hereby certify
(Name)

that this Resolution of the Board of Directors of UZIT INC
(Corporate Name)

a corporation duly organized and existing under the laws of the State of New Jersey
was duly adopted on 08/25/1998

Be it resolved, that UZIT INC
(Corporate Name)

organized and existing in the State of New Jersey, hereby adopts the name
UZIT Services Inc for use in Florida.

Dated: 08/29/03

W. Lee
Signature of either Chairman, Vice Chairman or any officer

WENDELL LEE
Type or print name

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

UZIT, INC.
0100755887

*I, the Treasurer of the State of New Jersey,
do hereby certify that the above-named
New Jersey Domestic Profit Corporation was
registered by this office on August 25, 1998.*

*As of the date of this certificate, said business
continues as an active business in the State of New
Jersey. Annual Reports are outstanding for the
following year(s):
2001*

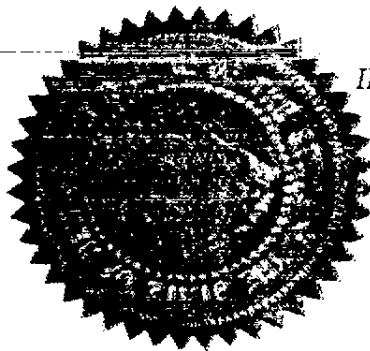
*I further certify that the registered agent and
registered office are:*

Wendell Lee
417 Central Ave
Suite 2000
Plainfield, NJ 07060

Continued on next page . . .

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

UZIT, INC.



IN TESTIMONY WHEREOF, I have
hereunto set my hand and
affixed my Official Seal
at Trenton, this
3rd day of October, 2003

A handwritten signature in cursive script, reading "John E. McCormac".

John E McCormac, CPA
State Treasurer