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03 OCT 24 1993
STATE
TALLAHASSEE, FLORIDA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

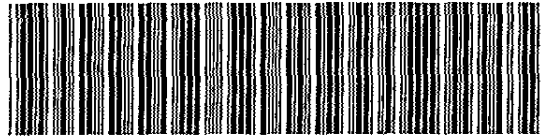
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TRANSMITTAL LETTER

FILED
03 OCT 24 PM 12:
SECRETARY OF STA
TALLAHASSEE, FLOR

TO: Registration Section
Division of Corporations

SUBJECT: EXPERTCITY.COM, 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:

MARY MONAGHAN

(Name of Person)

EXPERTCITY.COM, INC.

(Firm/Company)

5385 HOLLISTER AVE, SUITE 111

(Address)

SANTA BARBARA, CA 93111

(City/State and Zip code)

For further information concerning this matter, please call:

FRANK KOLESAR

(Name of Person)

at (818) 363-2337

(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. EXPERTCITY.COM, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DELAWARE

(State or country under the law of which it is incorporated)

3. 77-0476530

(FEI number, if applicable)

4. 5/27/1999

(Date of incorporation)

5. PERPETUAL

(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. 5385 HOLLISTER AVE, SUITE 111, SANTA BARBARA, CA 93111

(Principal office address)

5385 HOLLISTER AVE, SUITE 111, SANTA BARBARA, CA 93111

(Current mailing address)

8. WEB-BASED TECHNOLOGY 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: C T Corporation System

Office Address: 1200 South Pine Island Road,

Plantation

(City)

, Florida 33324

(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.

CT CORPORATION SYSTEM

TARA C. COOPER

(Registered agent's signature)

ASSISTANT SECRETARY

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: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: **JAN BUETTNER**

Address: **5385 HOLLISTER AVE, SUITE 111, SANTA BARBARA, CA 93111**

Director: **ED SIM**

Address: **5385 HOLLISTER AVE, SUITE 111, SANTA BARBARA, CA 93111**

B. OFFICERS

President: **ANDREAS VON BLOTTNITZ**

Address: **5385 HOLLISTER AVE, SUITE 111, SANTA BARBARA, CA 93111**

Vice President: _____

Address: _____

Secretary: **JOHN GREATHOUSE**

Address: **5385 HOLLISTER AVE, SUITE 111, SANTA BARBARA, CA 93111**

Treasurer: _____

Address: _____

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

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. _____

JOHN GREATHOUSE, SECRETARY AND CFO

(Typed or printed name and capacity of person signing application)

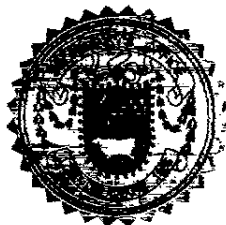
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Delaware

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PAGE 1
03 OCT 24 PM 12:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EXPERTCITY.COM, 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 THIRTIETH DAY OF SEPTEMBER, A.D. 2003.



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

3046925 8300

AUTHENTICATION: 2662264

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DATE: 09-29-03