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Florida Department of State

Division of Corporations Public Access System

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Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5926

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FOREIGN PROFIT QUALIFICATION

Payspot, Inc.

Certificate of Status	0
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M. Culligan AUG _ 9 2005

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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.

D-1			adopted for the purpose of transacting business in Florida	1)	
Delaware		_3.	20-0216173	_	
(State or country	under the law of which it is incorporated)	_	(FEI number, if applicable)		
09/10/2003		5.	Perpemal		
(Date	of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")	•	
01/31/2005					
	(Date first transacted busine	ss ii	Florida, if prior to registration)	~	
	(SEE SECTIONS 607.1501 & 60	7.15	02, F.S., to determine penalty liability)		
4601 College Blv	rd., Suite 300, Leawood, KS 66211				
	(Principal office	addı	ress)	_	
same					
	(Current mailing	addi	(62)		
			OS OS	•	
See Attachment			unitry to be carried out in state of Florida)		
	e) of corporation authorized in home state of	N CO	unitry to be carried out in state of Florida)	•	
(Purpose(ď		
, -	et address of Florida registered agent: (T.O	L BOX NUT acceptable)		
, -	et address of Florida registered agent: (O.T,	Box NOT acceptable)	Ě	
, -	et address of Florida registered agent: (CT Corporation System	.O.T)	3	Ž Q	
. Name and stree Name:	C T Corporation System	O.¶		Z 0:5	
. Name and stree		O.¶		ö	
. Name and stree Name:	C T Corporation System	(P.O		ö	

(Registered agent's signature)

C T Corporation System

John J. Linnihen, Asst. Vice President

- 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. DIR	RECTORS SEE ATTACHMENT		
Chairma	m:		. ,,,
Address:			
Vice Cha	girman:		
Address:			
Director:	Rick Weller		
Address:	4601 College Blvd., Suite 300		
	Leawood, KS 66211		
Director:	Jeffrey Newman		_
Address:	4601 College Blvd., Suite 300	<u>-</u>	
	Leawood, KS 66211		***
B. OFF	ICERS SEE ATTACHMENT		-
President:	Rick Weller		
Address:	4601 College Blvd., Suite 300		
	Leawood, KS 66211		
Vice Pres	sident: Joseph Bodine	0	PV S
Address:	4601 College Blvd., Suite 300	2	SION
	Leawood, KS 66211	<u> </u>	937
Secretary:	· Jeffrey Newman		850
Address:	4601 College Bivd., Suite 300 Legwood, KS 66211	ě	SST ASS
	: Eric Mettemeyer	<u>U</u>	STATE
	4601 College Blvd., Suite 300 Leawood, KS 66211		
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or di	rectors.	:
	(Signature of Director or Officer listed in number 12 of the application)		
14. <u>Tom</u>	Cregan, President		···
	(Typed or printed name and capacity of person signing application)		

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Attachment

Page 1 of 2

Attachment to Florida

Purpose Clause

The purpose of the corporation is to engage in any lawful act or activity for which corporations may be organized under state law, including but not limited to the distribution for profit of prepaid wireless personal identification numbers and other long distance and phone products, as well as offer other prepaid point-of-sale products for sale at various third-party locations.

Officers & Directors

Full Name: Officer/Director: Officer's Title: Director's Title: Business Address:

City: State: ZIP Code:

Full Name: 2. Officer/Director: Officer's Title: Business Address:

City: State: ZIP Code:

Full Name: 3. Officer/Director: Officer's Title: Business Address: City:

State: ZIP Code:

Full Name: Officer/Director: Officer's Title: **Business Address:** Cîty:

State: ZIP Code:

5. Full Name: Officer/Director: Officer's Title: Business Address: City:

ZIP Code:

State:

Rick Weller Officer, Director

Executive Vice President, CFO

Other Director

4601 College Blvd., Suite 300

Leawood KS 66211

Tom Cregan Officer President

4601 College Blvd., Suite 300

Leawood KS 66211

Joseph Bodine Officer Vice President

4601 College Blvd., Suite 300

Leawood KS 66211

David Hawkins Officer Vice President

4601 College Blvd., Suite 300

Leawood KS 66211

Cliff Tompkins Officer

Vice President

3002 Dow Avenue, Suite 108

Tustin CA 92780

/-- page -

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Attachment

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6. Full Name:
Officer/Director:
Officer's Title:

Business Address: City:

City: State: ZIP Code:

7. Full Name:
Officer/Director:
Officer's Title:
Director's Title:
Business Address:

City: State: ZIP Code:

8. Full Name:
Officer/Director:
Officer's Title:
Business Address:

City: State: ZIP Code:

Full Name:
 Officer/Director:
 Officer's Title:
 Director's Title:
 Business Address:

City: State: ZIP Code: Eric Mettemeyer
Officer
Treasurer
4601 College Blvd., Suite 300
Leawood
KS
66211

Jeffrey Newman Officer, Director Secretary Other Director 4601 College Blvd., Suite 300 Leawood KS 66211

Desmond Acosta
Officer
Assistant Secretary
4601 College Blvd., Suite 300
Leawood
KS
66211

Daniel Henry Director

Ofher Director 4601 College Blvd., Suite 300 Leawood KS 66211



PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PAYSPOT, 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 FIFTH DAY OF AUGUST, A.D. 2005.

AND I DO HERBY FURTHER CERTIFY TWAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BUEN PAID TO DATE.



Warriet Smith Hindan

AUTHENTICATION: 4073262

DATE: 08-05-05

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