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#### **COVER LETTER**

TO: New Filing Section Division of Corporations		
SUBJECT: MER Sites Se (Name of corpo	rvices inc	
(Name of corpo	ration - must include suffix)	
Dear Sir or Madam:		
	for Authorization to Transact Business in Florida," to register the above referenced foreign corporation to	
Please return all correspondence concerning this m		
MARIA E. Rodriguez Nam MER Sites Services (Firm		
(Nan	e of Person)	
MET SITES Services	INC	
(Firm	/Company)	
7777 2 2 3 19 3 19 1	VENUE SUITE ZIZ.	
Miami, Florida (City/s	Address)	
Miam, Florida	rate and Zin code)	
(City/Si	ate and Zip code)	
For further information concerning this matter, plea	ase call:	
Maria 6 Molique T at (3) (Name of Person) (A	rea Code & Daytime Telephone Number)	
V		
STREET/COURIER ADDRESS: New Filing Section	MAILING ADDRESS: New Filing Section	
Division of Corporations	Division of Corporations P.O. Box 6327	
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314	
Enclosed is a check for the following amount:		
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy	



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

April 10, 2006

MARIA E. RODRIGUEZ MER SITES SERVICES INC 2929 SW 3RD AVENUE, SUITE 202 MIAMI, FL 33129

SUBJECT: MER SITES SERVICES INC.

Ref. Number: W06000016766

We have received your document for MER SITES SERVICES INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Letter Number: 906A00023998

Loria Poole Document Specialist

### 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 MET SI-LES SOYNICOS 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. New York 3. 11-367 9718
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 03-11-2003 5. 161Petust.
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. There WOS 3 previous registrotion On 2003 was Never Detrience for the Company of the first transacted business if Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 2929 SW 31d Avenue Suite ZIZ
Principal office address)  Midni Florida 33129  (Current mailing address)
8. INTERIOR VENOUSTION OF COMPECTS and VEST deviced Spaces (Purpose(s) of corporation authorized in home state of country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Maria ( Tod ( que T
Name: Maria (.100 rique)  Office Address: 520 Brickell Koy Drive PHOI.
(City), Florida 33131 (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.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Avenue Suote 717 Vice Chairman: Address: Director: \_ Address: Director: Address: **B. OFFICERS** President: Vice President: Address: \_\_\_\_ Secretary: \_\_\_ 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) Kodriquez (Typed or printed name and capacity of person signing application)

## State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of MER SITES SERVICES, INC. was filed on 03/10/2003, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 12th day of April two thousand and six.

Special Deputy Secretary of State

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