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CORPORATION NAME(				) (if kı	nown):				
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NonProfit Limited Liability			Resignation of R.A., (	Officer/Director Agent			E :01111	:P	
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Fictitious Name			Limited Partnership						
Name Reservation			Reinstatement						
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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.

1.	TICKET POWER INC.			
	(Enter name of corporation; must include "INCORPORATI "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"	
				_
	(If name unavailable in Florida, enter alternate corporate na	me	adopted for the purpose of transacting business in Florida	1)
	DELAWARE	3.	20-5729756	_
	(State or country under the law of which it is incorporated)		(FEI number, if applicable)	
4.	10/17/2006	5.	PERPETUAL	
	(Date of incorporation)		(Duration: Year corp. will cease to exist or "perpetual"	)
6.	UPON FILING			
			n Florida, if prior to registration)	_
	(SEE SECTIONS 607.1501 & 60'	7.15	502, F.S., to determine penalty liability)	
7.	540 NW 165th Street Rd., Suite 301, Miami, Florida 33	16	r	
	(Principal office a	add	ress)	_
	540 NW 165th Street Rd/, Suite 301, Miami, Florida 33	16	7 -	
	(Current mailing a	add	ress)	_
8.	any activity or business permitted under the laws of the	e U	nited States and of the State of Florida	<del></del>
	(Purpose(s) of corporation authorized in home state o	rcc		
9.	Name and street address of Florida registered agent: (	P.C	). Box NOT acceptable)	
			D. Box NOT acceptable)	U
	Name: SPIEGEL & UTRERA, P.A.		<u> </u>	
O	ffice Address: 1840 SW 22nd Street, 4th Floor		——————————————————————————————————————	
	Miami		, Florida <u>33145</u>	
	(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.
- 12. Names and business addresses of officers and/or directors:

#### A. DIRECTORS

Chairma	man: James Buckman				,
Address:	ss: 540 NW 165th Street, Rd., Suite 301				<u> </u>
	Miami, FL 33167	# ; <u></u>	<u> </u>		_ ALL.
Vice Cha	Chairman:				<u> </u>
Address:	ess:				. 2
Director:		,			
Address:	ss:			<u> </u>	·
		s · ·			·
Director:	or:		•		. <u> </u>
Address:	ss:		<u></u>	<u> </u>	<u></u>
					<u></u>
B. OFF	FFICERS				
President	ent: James Buckman				<u> </u>
Address:	ss: 540 NW 165th Street Rd., Suite 301	•			
	Miami, FL 33167			6 S	
Vice Pres	President: Dr. Kurt Marin		ز حات <u>د چسم اراد ما</u>		7
Address:	ss: 540 NW 165th Street Rd., Suite 301	···	in en	. 10	
	Miami, FL 33167	<u> </u>	, m.	. 0	Ö
Secretary	ary:		<u>.</u> ئۆ	39 F	,
Address:	ss: 540 NW 165th Street Rd., Suite 310, Miami, FL 33167				<u> </u>
Treasure	urer: James Buckman			<u>.                                    </u>	- <del>14 m. j.</del> -
	ss: 540 NW 165th Street Rd., Suite 310, Miami, FL 33167			<u> </u>	* E
NOTE:	E: If necessary, you may attach an addendum to the application listing additional of		and/or d	irectors.	
/	(Signature of Director or Officer listed in number 12 of the applic	ation)			
14. (Jap	James Buckman, President  (Typed or printed name and capacity of person signing applications)	ion)		<u>.                                    </u>	

# Delaware

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TICKET POWER 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 TWENTIETH DAY OF OCTOBER, A.D. 2006.



Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5133892

DATE: 10-20-06

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