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(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	-Iling Officer:	
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Office Use Only



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B. McKnight FEB 1 9 2007

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: PEERLESS SATELLITE 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:
DEBORAH HASSINGER
(Name of Person)
PEERLESS SATELLITE INC (Firm/Company)
(Firm/Company)
629 TERNBERRY FOREST DR. (Address)
THE UILLAGES FL 32162 (City/State and Zip code)
(City/State and Zip code)
\cdot
For further information concerning this matter, please call:
DEBORAH HASSINGED at (352) 430.0385
(Name of Person) (Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: MAILING ADDRESS:
New Filing Section New Filing Section
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32314
Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\bigcup \\$78.75 Filing Fee & \bigcup \\$78.75 Filing Fee & \bigcup \\$87.50 Filing Fee, Certificate of Status & Certificate of Status &
Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

PEERL	£55	SAT	ELL	ITE,	MC.		(AN	<u>ر څ</u>	" CO	RPORAT	<u> 110</u> 10)	
(Enter name of co					ORATED,"	"COMPA	NY," "COR	PORAT	ion,"			
,	.,	,	F	,								
(If name unavailal	ble in Flo	rida, ente	r alterna	te corpo	rate name a	dopted for	the purpose of	of transa	cting busin	ness in Florid	a) LILEN:	s E
PENNSYL (State or country u	VAV.	LIA_			3	23	290 0	0016	b EI	N		
. JLLNE	199	76			5	PER	PETU	4				
(Date o	of incorpo	ration)				(Duration:	Year corp. v	will ceas	e to exist o	or "perpetual"	")	
•		(Data	- Erect two	neogtod '	huainasa in	Ploside if.	orior to regis			······································		
	(5						determine pe		bility)			
574 H	FILL	RD.	G	RE	EN I	LAN) 5	PA	,	8051	<i>f</i>		
			(P	rincipal	office addre	ess)	-, -	·				
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			(C	urrent m	ailing addre	ess)			,		•	
SATELL	177 1	2000	N C A	57 4	601110	M = 1 1 T	- 501	6 C	(BO	~~ <u>~~</u> 	07 FEB	• ,
(Purpose(s)	of corpor	ation auti	horized	in home	state or cou	intry to be o	arried out in	state of	Florida)	大学	83.3	· —13
Name and street	address	of Florid	la regist	tered ag	ent: (P.O.	Box NO	Γ accentable	e)		SSA	5	卫科
	_						_ucceptubit	-,		m [€]		
Name:	DEE	BORA	<u>/- </u>	1 H 55	INGER					FLO	PH 12: 4	
office Address:	62	9 7	ERN	BER	RY F	OREST	DR				ران ت	
	7746	- VIL	LAGI	ÉS		, Flori	da <u>32</u> (Zip co	162				
			(City	·)	-	,	(Zip co	ode)				
								-				

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.

Yelioruh Hassengir
(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:

IRECTORS	
nan: DEBORAH HASSINGER	
SS: 629 TERNBERRY FOREST DRIL	J e
THE VILLAGES, FI 32162	
hairman: SAME	
s:	
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SAME	4ASS 16
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SAME	
THE VILLAGES, FL 32162 sident: SAME	W
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r:	
: If necessary, you may attach an addendum to the application listing additio	onal officers and/or directors.
Helyonup Hussing	
Signature of Director or Officer listed in number 12 of the ap DEBORAH HASSINGER Pres. (Typed or printed name and separate of separation in a point of separation of sep	oplication)
DEBORAH HASSINGER Dres.	
(Typed or printed name and capacity of person signing appl	lication)

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

JANUARY 31, 2007

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

PEERLESS SATELLITE, INC.

OZHEB 16 PM 12: 45
SECRETAR: UP STATE
JALLAHASSEE FI ORINA

07FEB | 6 PM |2: L=

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth