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NO. 732 PP. 1 of 1

Florida Department of State  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**FOREIGN PROFIT/NONPROFIT CORPORATION**

**PHONE1 REMITTANCE, INC**

Certificate of Status	0
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*J. Shivers* JUL 23 2007

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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

**INCOMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.**

**1. Phone1 Remittance, Inc.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "In.," "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.****Pending**

(FEL number, if applicable)

**4. JULY 19, 2007**

(Date of incorporation)

**5. PERPETUAL**

(Duration: Year corp. will cease to exist or "perpetual")

**6. EFFECTIVE UPON FILING**

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, P.S., to determine penalty liability)

**7. 100 NORTH BISCA YNE BLVD. SUITE 1200, MIAMI, FL 33132**

(Principal office address)

**100 NORTH BISCAYNE BLVD, SUITE 1200, MIAMI, FL 33132**

(Current mailing address)

**8. FINANCIAL 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 NOT acceptable)**

Name: **Oliverio Lew, Esq.**

Office Address: **100 North Biscayne Blvd, Suite 1200**  
**Miami**

(City)

, Florida

**33132**

(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.*

**Oliverio Lew**

By: 

(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.**

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TALLAHASSEE, FLORIDA

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman:

Address:

Vice Chairman:

Address:

Director: OLIVERIO LEW

Address: 100 NORTH BISCAYNE BLVD, SUITE 1200, MIAMI, FL 33132

Director:

Address:

B. OFFICERS

President: OLIVERIO LEW

Address: 100 NORTH BISCAYNE BLVD, SUITE 1200, MIAMI, FL 33132

Vice President: DILOWE BARKER (CHIEF OPERATING OFFICER)

Address: 100 NORTH BISCAYNE BLVD, SUITE 1200, MIAMI, FL 33132

Secretary: SYED NAOVI

Address: 100 NORTH BISCAYNE BLVD, SUITE 1200, MIAMI, FL 33132

Treasurer: SYED NAOVI (ALSO CHIEF FINANCIAL OFFICER)

Address: 100 NORTH BISCAYNE BLVD, SUITE 1200, MIAMI, FL 33132

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

13.

(signatory or Officer listed in number 12 of the application)

14. OLIVERIO LEW, PRESIDENT

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

# Delaware

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*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PHONE1 REMITTANCE, 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 NINETEENTH DAY OF JULY, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PHONE1 REMITTANCE, INC." WAS INCORPORATED ON THE NINETEENTH DAY OF JULY, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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070830404

*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5856300

DATE: 07-19-07