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ALL AHASSEE, FLORIDA

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SPIEGEL & U		. Si
(Requesto	STREET, 4TH FLOOR	est in
Міамі, FL 33145	i - (305) 854-6000	
ORPORATION NAME(S) & f known):	& DOCUMENT NUMBER(S)	OFFICE USE ONLY
EGENUITY INC.		
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Profit	Amendment	
NonProfit	Resignation of R.A., Of	ficer/Director
Limited Liability	Change of Registered A	gent
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Annual Report Fictitious Name	QUALIFICATION  Foreign  Limited Partnership	
Annual Report	QUALIFICATION  Foreign  Limited Partnership  Reinstatement	
Annual Report Fictitious Name	QUALIFICATION  Foreign  Limited Partnership	

## 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. eGenuity I (Enter name of co "Inc.," "Co.," "Co	nc.  orporation; must include "INCORPORATED,  orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,	
(If name unavaila	ble in Florida, enter alternate corporate name	adopted for the purpose of transacting	business in Florida)
, Delaware	3	20:8887949	
·	ander the law of which it is incorporated)	(FEI number, if appli	cable)
4 07/07/2007	7 5		
••	of incorporation)  NOT DOS DI	(Duration: Year corp. will cease to	exist or "perpetual")
· · · · · · · · · · · · · · · · · · ·		n Florida, if prior to registration) 502, F.S., to determine penalty liability	y)
<sub>7.</sub> 5915 Sea F	Ranch Dr. suite 510, Hudsor	n Florida 34667	
	(Principal office add	lress)	
5915 Sea l	Ranch Dr. suite 510, Hudsor	n Florida 34667	
8. Purpose(s)	ONCH ANY O	awful busine	rida)
9. Name and stree	address of Florida registered agent: (P.C	D. Box NOT acceptable)	ZOT SE SE
Name:	SPIEGEL & UTRERA,		T SEP
Office Address:	1840 SW 224 STRET	ET4B Floor	I I I I
	Miami	, Florida <u>33145</u> (Zip code)	
designated in this further agree to co and I am familiar	ed as registered agent and to accept serve application, I hereby accept the appoints omply with the provisions of all statutes twith and accept the obligations of my positive and accept the obligations of the positive and accept the obligations of the positive and the province and the province are accept the obligations of the positive accept the obligations of the province accept the appoint the province accept the a	ice of process for the above stated ment as registered agent and agree relative to the proper and complete osition as registered agent.	$e$ to act in this capacity. $I_{ m s}$

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

5915 Sea Ranch Dr. suite 510, Hudson Florida 34667	···································	<del></del>	
airman:			
	··	<del>, , , , , , , , , , , , , , , , , , , </del>	·- <u></u>
Debra Francis			
5915 Sea Ranch Dr. suite 510, Hudson Florida 34667	<u>.</u>	·····	
Daniel Baldwin			
5915 Sea Ranch Dr. suite 510, Hudson Florida 34667	<del></del>		
Debra Francis 5915 Sea Ranch Dr. suite 510, Hudson Florida 34667			
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•	<del>- 59</del>		
	ETARY OF HASSEE.	~~ ~	
Daniel Baldwin 5915 Sea Ranch Dr. suite 510, Hudson Florida 34667	ETARY OF STATE HASSEE, FLORIC	2 A II: 2	
Daniel Baldwin 5915 Sea Ranch Dr. suite 510, Hudson Florida 34667	HASSEE, FLORIDA	2 A II: 29	
Daniel Baldwin 5915 Sea Ranch Dr. suite 510, Hudson Florida 34667	TATE ORIDA	_ <b>_</b> _	ors.