# F07000004648

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Do	ocument Number	)
Certified Copies	_ Certificate	s of Status
Special Instructions to Filing Officer:		

Office Use Only



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TALLAHASSEE, FLORIDE

MR)

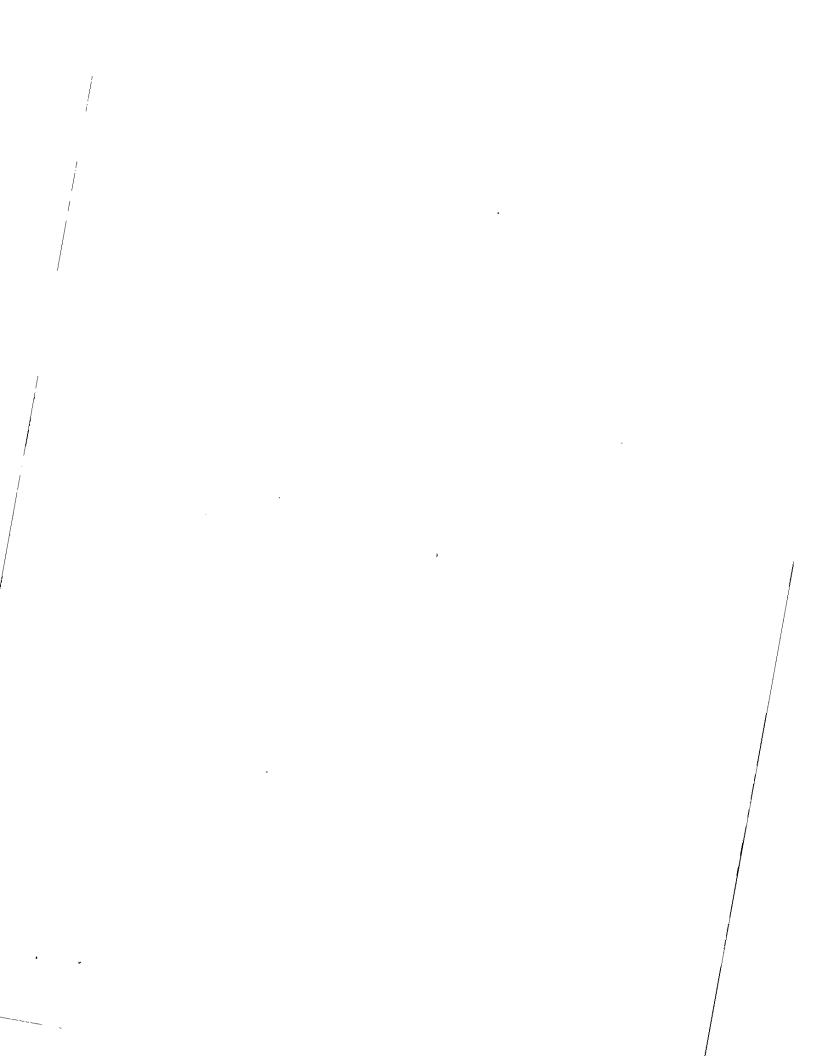
#### **COVER LETTER**

TO: New Filing Section Division of Corporations		
SUBJECT: Pixel ophi	CS, Inc.	
(Name of corpo	ration - must include suffix)	
Dear Sir or Madam:		
	for Authorization to Transact Business in Florida," I to register the above referenced foreign corporation to	
Please return all correspondence concerning this m	atter to the following:	
- Evelyn	ne of Person)	
•		
Pi x	elophics, tric	
(Firm	n/Company)	
2640 Hershbliger Laudki. 2 (City/s	r RU, sutte B	
(,	Address)	
facuti, i	Irsinia ayor+	
(City/S	tate and Zip code)	
For further information concerning this matter, plea	ase call:	
EMIN (+BKell at (5)	10, 7777691	
(Name of Person) at (540) 777 694 (Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
New Filing Section Division of Corporations	New Filing Section Division of Corporations	
Clifton Building	P.O. Box 6327	
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	\$78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy	

## 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. PIKEL OPTICS, TWO
(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. Del Curación 3. 20-5-35 35160B(control (State or country under the law of which it is incorporated)
4. 8-31-05 5. Review (Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) enshbergen RU, SUUB ROCENTY SA 24017 (Current mailing address) Employee office (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: ANTHONY VAN HEUGTEN Office Address: 4107 FIND AVENUE, G. (City) 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.

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.

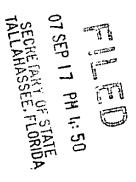


# Delaware

PAGE 1

### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PIXELOPTICS, 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 EIGHTH DAY OF SEPTEMBER, A.D. 2007.





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Darriet Smith Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5985160

DATE: 09-08-07