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Division of Corporations

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Florida Department of State
Division of Corporations
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FOREIGN PROFIT/NONPROFIT CORPORATION

SALESGENIE.COM, INC.

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DIVISION OF CORPORATION

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80-2-6

**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. SALESGENIE.COM, INC.

(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. Delaware

(State or country under the law of which it is incorporated)

3. _____

(FEI number, if applicable)

4. 07/23/2007

(Date of incorporation)

5. Perpetual

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

6. Upon Qualification

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

7. 5711 SOUTH 86TH CIRCLE, OMAHA, NE 68127

(Principal office address)

SAME

(Current mailing address)

8. SALE OF BUSINESS AND CONSUMER DATA

(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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

Florida

33324

(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.

C T Corporation System

By: _____

(Registered agent's signature)

CONNIE MORGAN
SPECIAL ASSISTANT SECRETARY

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:

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A. DIRECTORS

Chairman: VINOD GUPTA

Address: 5711 SOUTH 86TH CIRCLE

OMAHA, NE 68127

Vice Chairman: _____

Address: _____

Director: FRED VAKILI

Address: 5711 SOUTH 86TH CIRCLE

OMAHA, NE 68127

Director: _____

Address: _____

B. OFFICERS SEE ATTACHMENT

President: VINOD GUPTA

Address: 5711 SOUTH 86TH CIRCLE

OMAHA, NE 68127

Vice President: D.J. THAYER

Address: 5711 SOUTH 86TH CIRCLE

OMAHA, NE 68127

Secretary: FRED VAKILI

Address: 5711 SOUTH 86TH CIRCLE, OMAHA, NE 68127

Treasurer: _____

Address: _____

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

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. FRED VAKILI, Secretary

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

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**Attachment to Florida
Officers & Directors**

1 Full Name:	STORMY DEAN
Officer/Director:	Officer
Officer's Title:	CFO AND TREASURER
Director's Title:	
Business Address:	5711 SOUTH 86TH CIRCLE
City:	OMAHA
State:	NE
ZIP Code:	68127

Delaware

The First State

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SALESGENIE.COM, 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 TWENTY-EIGHTH DAY OF MARCH, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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TALLAHASSEE, FLORIDA



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080371480

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6486345

DATE: 03-28-08