

To: FL Dept. of State  
Subject: 001668-1096

From: Katie Wonsch

Monday, August 18, 2008 11:38 AM Page: 1 of 5

Division of Corporations

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Florida Department of State  
Division of Corporations  
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To:

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From:

Account Name : CORPDIRECT AGENTS, INC.  
Account Number : 110450000714  
Phone : (850) 222-1173  
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001668-91096

**FOREIGN PROFIT/NONPROFIT CORPORATION**

**EXHALE ENTERPRISES XIII, INC.**

Certificate of Status	0
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DIVISION OF CORPORATIONS

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To: FL Dept. of State  
Subject: 001668.91096

From: Katie Wonsch

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850-617-6381

PAGE 001/001 Florida Dept of State



August 15, 2008

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CORPDIRECT AGENTS, INC.

SUBJECT: EXHALE ENTERPRISES XIII, INC.  
REF: W08000038451

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Becky McKnight  
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P.O. BOX 6327 - Tallahassee, Florida 32314

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**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. EXHALE ENTERPRISES XIII, 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. 8/4/2008**

(Date of incorporation)

**5. Perpetual**

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

**6.**

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

**7. 250 West 57th Street, Suite 1901, New York, NY 10019**

(Principal office address)

**250 West 57th Street, Suite 1901, New York, NY 10019**

(Current mailing address)

**8. To engage in any lawful act or activity for which corporations may be organized under the corporation laws of**

(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: **CorpDirect Agents, Inc.**

Office Address: **515 E. Park Avenue**

**Tallahassee**

(City)

, Florida

**32301**

(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.*

*Katie Wonsch, Asst. Sec.*

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

A. DIRECTORS

Chairman: Annbeth Eschbach

Address: 250 West 57th Street, Suite 1901, New York, NY 10019

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS

President: Annbeth Eschbach

Address: 250 West 57th Street, Suite 1901, New York, NY 10019

Vice President: Julia Sutton

Address: 250 West 57th Street, Suite 1901, New York, NY 10019

Secretary: D. Dane Johnston

Address: 250 West 57th Street, Suite 1901, New York, NY 10019

Treasurer: D. Dane Johnston

Address: 250 West 57th Street, Suite 1901, New York, NY 10019

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. D. Dane Johnston, Secretary

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

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# Delaware

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## *The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EXHALE ENTERPRISES XIII, 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 FOURTH DAY OF AUGUST, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EXHALE ENTERPRISES XIII, INC." WAS INCORPORATED ON THE FIRST DAY OF AUGUST, A.D. 2008.

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

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You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6770180

DATE: 08-04-08

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