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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

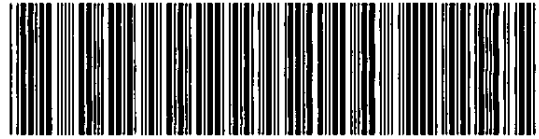
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TALLAHASSEE, FLORIDA



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Our File: 71263-1

March 6, 2009

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Re: Purchase Direct, Inc.**

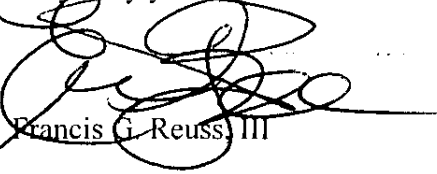
Dear Sir/Madam:

Enclosed please find the following with regard to Purchase Direct, Inc.:

1. Original and copy of Cover Letter;
2. Original and copy of Application by Foreign Corporation for Authorization to Transact Business in Florida;
3. Short form Good Standing Certificate from the State of New Jersey, Department of Treasury; and
4. Our firm's check in the amount of \$78.75 for the filing fee and certified copy.

I kindly ask if you could please file the application and return a certified copy to me in the enclosed envelope for my file. Should you have any questions with regard to this request, please do not hesitate to contact me.

Very truly yours,



Francis G. Reuss, III

FGR/te  
Enc.

cc: Ms. Lillian R. Ashton (letter only)  
Cynthia L. Ewing, C.P.A. (letter only)

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Purchase Direct, Inc.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Francis G. Reuss, III  
(Name of Person)

Fox Rothschild LLP  
(Firm/Company)

1301 Atlantic Avenue, Suite 400  
(Address)

Atlantic City, NJ 08401  
(City/State and Zip code)

For further information concerning this matter, please call:

Francis G. Reuss, III at ( 609 ) 572-2256  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**  
New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
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 & Certified Copy
- \$87.50 Filing Fee, 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. Purchase Direct, 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. New Jersey

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

3. \_\_\_\_\_

(FEI number, if applicable)

4. November 13, 1996

(Date of incorporation)

5. Perpetual

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

6. N/A

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

7. 15918 Los Olivos Lane, Naples, Florida 34110

(Principal office address)

15918 Los Olivos Lane, Naples, Florida 34110

(Current mailing address)

8. Consulting 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: Lillian R. Ashton

Office Address: 15918 Los Olivos Lane

Naples

(City)

, Florida 34110

(Zip code)

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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.*

Lillian R Ashton  
(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.

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

**A. DIRECTORS**

Chairman: Lillian R. Ashton

Address: 15918 Los Olivos Lane  
Naples, Florida 34110

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

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

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

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

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

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

**B. OFFICERS**

President: Lillian R. Ashton

Address: 15918 Los Olivos Lane  
Naples, Florida 34110

Vice President: \_\_\_\_\_

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

Secretary: Lillian R. Ashton

Address: 15918 Los Olivos Lane, Naples, Florida 34110

Treasurer: Lillian R. Ashton

Address: 15918 Los Olivos Lane, Naples, Florida 34110

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

13. Lillian R. Ashton  
(Signature of Director or Officer listed in number 12 of the application)

14. Lillian R. Ashton, President  
(Typed or printed name and capacity of person signing application)

**STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING**

**PURCHASE DIRECT, INC.**

0100685497

*I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on November 13, 1996.*

*As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.*

*I further certify the registered agent and registered office are:*

*Cynthia L. Ewing  
57 Washington Street  
Bridgeton, NJ 08302*



Certificate Number: 113733376

Verify this certificate online at

[https://www1.state.nj.us/TYTR\\_StandingCert/JSP/Verify\\_Cert.jsp](https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp)

*IN TESTIMONY WHEREOF, I have  
hereunto set my hand and affixed  
my Official Seal at Trenton, this  
23rd day of February, 2009*

*R. David Rousseau  
State Treasurer*