Page 1 of 1

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6381

Account Name : INCORPORATING SERVICES FL

Account Number: I20050000052 Phone : (302)531-0855 Fax Number

: (850)656-7953

FOREIGN PROFIT/NONPROFIT CORPORATION

Call Master, Inc.

| Certificate of Status | |
|-----------------------|---------|
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Electronic Filing Menu

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Help

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. Call Master, Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, oner alternate corporate name adopted for the purpose of transacting business in Florida) oreaux (State or country) under the law of which it is incorporated (FEI number, if applicable) (Duration: Year corp. will coase 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) enue uthorized in home state or country to be carried out in state of Florida) Name and attract address of Florida registered agent; (P.O. Box NOT acceptable) NRAI Services, Inc. Name: 2731 Executive Park Dr., Ste 4 Office Address: Weston (Chy) 10. Registered agent's acceptance: flaving 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. NRAI Services, Inc.

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 Chairmen: ___ Addresi: _ Vice Chairmant __ Address: B. OFFICERS President _Tohy Hillsboop. Secretary: _ Address NOTE: If necessary, you may appech an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) (Typed or printed name and capacity of person signing application)

CERTIFICATE

State of Oregon

OFFICE OF THE SECRETARY OF STATE Corporation Division

I, KATE BROWN, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:

CALL MASTER, INC.

was

incorporated

under the Oregon

Business Corporation Act

on

February 17, 2009

and is active on the records of the Corporation Division as of the date of this certificate.



In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.

KATE BROWN, Secretary of State

Marthyn R. Smith

February 20, 2009

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