To: FL Dept of Monday, Ma 11 Itate From 2 Subject 0009 1067 http //efile. lcov exe of Corporations bizo Divisie ent of State **Division of Corporations** Public Access System **Electronic Filing Cover Sheet** Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document. (((H09000116873 3))) H09000H168733ABC2 Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. To: Division of Corporations Fax Number : (850)617-6381 From: Account Name CORPDIRECT AGENTS, INC. : Account Number 110450000714 : (850) 222-1173 Phone Fax Number (850) 224-1640 1916.104067.7 FOREIGN PROFIT/NONPROFIT CORPORATION 7/12 5 DOMAINHIP.COM INC. 69 Certificate of Status 0 Certified Copy 0 Page Count 05 Estimated Charge \$70.00 STATE **Electronic Filing Menu Corporate Filing Menu** Help MD

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			马鼠
APPLICA	TION BY FOREIGN CORPORATION FOR AUTHORIZATIC BUSINESS IN FLORIDA	ON TO TRANSAC	·····
	S WITH SECTION 607. I SO3, FLORIDA STATUTES, THE FOLLOWING IS REIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF F		PH 4: 15
	p.com Inc.		5
(Enter name of c "(nc.," "Co.," "C	exponsion; must include "INCORPORATED," "COMPANY," "CORPORATIO erp," "Inc," "Co," or "Corp.")	<b>N,</b> "	
•	able in Florida, enter alternate corporate name adopted for the purpose of transacti	ng business in Fiorida)	
2. Delaware (State or country	under the law of which it is incorporated) (FEI number, if app	licubie)	
4 7/6/2005	5. perpetual	· · .	· .
(Data	t of incorporation) (Duration: Year corp. will cease t	o exist or "perpetual")	· ` ,
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liabil		
7. 20 SW 27	th Avenue, Suite 201, Pompano Beach, FL 33069		
	(Principal office address)		•
·	(Current malling address)		· • •
	ame Registrar s) of corporation authorized in home state or country to be carried out in state of PI		
(turbose(	() of comonation authorized in nome state of country to be carried out in state of P		
		Derivally.	
	nt address of Florida registered agent: (P.O. Box NOT acceptable)	Derica)	
	at eddress of Florida registered agent: (P.O. Box <u>NOT</u> acceptable) Registered Agent Solutions, Inc.		
9. Name and <u>stre</u>	nt address of Florida registered agent: (P.O. Box NOT acceptable)		
9. Name and <u>stre</u> Name:	Registered Agent Solutions, Inc. 155 Office Plaza Dr., Suite A	(FRIGR)	. •
9. Name and <u>stre</u> Name:	nt eddress of Florida registered agent: (P.O. Box <u>NOT</u> acceptable) Registered Agent Solutions, Inc. <u>155 Office Plaza Dr. , Suite A</u>		. •
<ol> <li>Name and strg: Name:</li> <li>Office Address:</li> <li>10. Registered a Having been nam designated in this further agree to g</li> </ol>	A seddress of Florida registered agent: (P.O. Box <u>NOT</u> acceptable) <u>Registered Agent Solutions, Inc.</u> <u>155 Office Plaza Dr. , Suite A</u> <u>Tallahassee</u> , Florida <u>32301</u> (City) gent's acceptance: teed as registered agent and to accept service of process for the above state. application, I hereby accept the appointment as registered agent and agent application, I hereby accept the appointment as registered agent and agent application, I hereby accept the appointment as registered agent and agent applications of all statutes relative to the proper and comple- tion accept the obligations of my position as registered agent.	d corporation at the p as to act in this capes	iv. I
9. Name and stre Name: Office Address: 10. Registered a Having been nam designated in this further agree to p and I am familia 11. Attached is a the Department of	At eddress of Florida registered agent: (P.O. Box <u>NOT</u> acceptable) Registered Agent Solutions, Inc. <u>155 Office Plaza Dr.</u> , Suite A <u>Tallahassee</u> , Florida <u>32301</u> (City) gent's acceptance: ted as registered agent and to accept service of process for the above state. opplication, I hereby accept the appointment as registered agent and agent findply with the provisions of all statutes relative to the proper and complete	d corporation at the p se to act in this copic to performence of my	:iy. 1 • dutles, tion to

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H09000116873 3 12. Names and business addresses of officers and/or directors:	DIVISION
12. Names and business addresses of officers and/or directors:	017
A. DIRECTORS	1.000 1.000
Chairman: Jeff Kupletzky	PUR SI
Address: 515 S. Flower Street, Suite 4400, Los Angeles, CA 90071	OF STATE
	5
Vice Chairman: Monte Cahn	• •
Address: 20 SW 27th Avenue, Suite 201, Pompano Beach, FL 33069	
	•
Director. Todd Greene	•
Address: 515 S. Flower Street, Suite 4400, Los Angeles, CA 90071	-
	•
Director: Elizabeth Murray	
Address: 515 S. Flower Street, Suite 4400, Los Angeles, CA 90071	-
	-
B. OFFICERS	
President: Monte Cahn	
Address: 20 SW 27th Avenue, Suite 201, Pompano Beach, FL 33069	
	\$
Vice President: Todd Greene	• •
Address: 515 S. Flower Street, Suite 4400, Los Angeles, CA 90071	
	•
Secretary: Todd Greene	
Address: 515 S. Flower Street, Suite 4400, Los Angeles, CA 90071	*
Treasurer: Elizabeth Murray	, , ,
Address: 515 S. Flower Street, Suite 4400, Los Angeles, CA 90071	4
NOTE: Unequesary, you may attach an addendum to the application listing additional officers and/or directors.	· · ·
13. All and a second	
(Signature of Director or Officer listed in number 12 of the application)	;
(Typed or printed name and capacity of parson signing application)	ŧ.
	¥.
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## ADDENDUM Officers

Chairman:

a - 4

Jeff Kupietzky 515 S. Flower St., Suite 4400, Los Angeles, CA 90071

Address:

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO BEREBY CERTIFY "DOMAINHIP.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-NINTH DAY OF APRIL, A.D. 2009.

3871302 8300

**Date: 04-29-09** H09000116873 3

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