## Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CORPDIRECT AGENTS, INC.

Account Number : 110450000714 Phone : (850)222-1173 Fax Number : (850)224-1640

0164.107259

## FOREIGN PROFIT/NONPROFIT CORPORATION

PHIDS, INC.

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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. PHIDS, 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) 3, 270348217 2. Delaware (State or country under the law of which it is incorporated) (FEI mumber, if applicable) 06/10/2009 <sub>5,</sub> perpetual (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") 06/12/2009 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7.877 Executive Center Drive West, Suite 300, St. Petersburg, FL 32702 (Principal office address) same as principal address (Current mailing address) 8. Any lawful act or activity for which corporations may be organized (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) CorpDirect Agents, Inc. Name: 515 East Park Avenue Office Address: <u>Tallahassee</u> Florida (City) (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.

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2. Names and ad	hiresses of officers and/or directors:
. Directors	ı
Chairman:	
19010001	
/loe Chairman:	
\ddress:	
(durcus:	
B. OFFICERS CEO Presidente Paul Sc Address: 877 Exc	citoff ecutive Center Drive West, Suite 300, St. Petersberg, FL 33702
Vice President:	
Address:	
NOTE: If necess	ery, you may attach an addengup; to the application listing additional officers and/or directors.
13	Thul Suball
(Signa	fure of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14	Paul Soltoff, Chief Executive Officer

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# Delaware

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## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "PHIDS, 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 EIGHTH DAY OF JULY, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PHIDS, INC." WAS INCORPORATED ON THE TENTH DAY OF JUNE, A.D. 2009.

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

SECRETARY OF STATE

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Jeffrey W. Bullock, Secretary of State
AUTHENTY CATION: 7406921

DATE: 07-08-09

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