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Certified Copies	_ Certificates	of Status			
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## **COVER LETTER**

	ew Filing Secivision of Cor				
SUBJEC	T:	VSX_	Enterp	orises, Inc.	·
		Name	of corporatio	n - must include suffix	
Dear Sir o	r Madam:				
"Certificat	e of Existenc	ion by Foreign Coe." or "Certificate n corporation to t	of Good Sta	nding" and check are su	act Business in Florida." bmitted to register the
Please retu	ırn all corresp	ondence concern	ing this matte	r to the following:	
	16:	mberly	Carr		
			Name of	Person	
	V.5	3X Enter	nises	Person Tuc- npany	
			Firm/Co	npany	
140	6 NW	37th St		ress and Zip code	
			Addı	ress	
$\underline{\mathcal{M}}$	iami, F	-L 3	3127		
	,		City/State a	and Zip code	
	1/sin	n@ VSXir	1C.COM	and Zip code  for future annual report	notic
		E-man addres	s: (10 be usea	for ruture annual report	notification)
For further	r information	concerning this n	natter, please	call:	
Hiv N	n Car	<u>/</u>	at ( <u>310</u> Area	) <u>467-65</u> Code & Daytime Telep	77 hone Number
No Di CI 26	ew Filing Sec vision of Cor ifton Building	porations 3 Center Circle	S:	MAILING A New Filing S Division of O P.O. Box 633 Tallahassee,	Section Corporations 27
Enclosed is	s a check for	the following amo	ount:		
\$70,00	Filing Fee	\$78.75 Filin Certificate of	g Fee & I	\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status &

## 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. VSX Enter prises, Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") VSX Software, The.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) California
(State or country under the law of which it is incorporated)

3. 27-1452242
(FEI number, if applicable) 4. 11.18.09 5. Perpetual 7. (Duration: Year corp. will cease to exist or "petual for "petu Will begin 3.1.10

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 146 NW 37th St Miami FL 33127
(Principal office address) (Principal office address)

146 NW 37th St Miami FL 33127

(Current mailing address) 8. Website consulting Idevelopment
(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) Andrew Stoddard Name: 799 NE 7 and St Office Address: 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.

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.

(Registered agent's signature)

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

A. DIRECTORS	
Chairman: Andrew Stoddard	
Address: 146 NW 374 St	
Miani FL 33127	
Vice Chairman: Hector Bouron	
Address: 146 NW 374 St	
Miany FL 33127	
Director: 1himberty Tiemsland	700 0 mg/m
Address: 146 NW 37th St.	E I
Miam: FL 33127	
Director:	SEE PA P.
Address:	F. 08 5: 08
	Dri Dri
B. OFFICERS	
President: Andrew Stoddard	
Address: 146 NW 37th St	
Miami, FL 33127	
Vice President: Hector Barron	
Address: 146 NW 37th St	
Miami FL 33127	
Secretary: Andrew Stoddard	
Address: 146 NW 37th St Miani FL3	3127
Treasurer: Kimberly Tjemsland	
Address: 146 NW 37th St Miami Fa	L 33127
NOTE: If necessary, you may attach an addendum to the application listing	ng additional officers and/or directors.
13(Signature of Director or Officer listed in number 12	2 of the application)
14. And rew Stoddard	· or the application)
(Typed or printed name and capacity of person sig	ning application)

## State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

VSX ENTERPRISES, INC.

FILE NUMBER:

FORMATION DATE:

TYPE:

FIPE:

JURISDICTION:

STATUS:

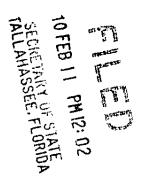
C3260569

11/18/2009

DOMESTIC CORPORATION

CALIFORNIA

ACTIVE (GOOD STANDING)



I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of February 03, 2010.

DEBRA BOWEN Secretary of State