F100000003420

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



300179958683

05/24/10--01060--004 **78.75

18 MAY 24 PH 12: 58



COVER LETTER

TO:	New Filing Section Division of Corpo				
SUBJ	ECT: IOMATIX, IN				
		Name of corpora	tion - must include suffix		
Dear S	ir or Madam:				
"Certi	ficate of Existence,"		for Authorization to Transac Standing" and check are sub siness in Florida.		
Please	return all correspon	dence concerning this ma	tter to the following:		
JEFF (CHARETTE				
		Name	of Person		
IOMAT	TX, INC.				
		Firm/C	Company		
75 CE	DAR ST. APT B			-	
		Ac	ddress		
SAINT	AUGUSTINE, FL 32	2084			
		City/Star	te and Zip code		
IOMAT	IX@YAHOO.COM	F (1 - 1.1		(100	
		E-man address: (to be us	ed for future annual report r	lotification)	
For fu	ther information cor	ncerning this matter, pleas	se call:		
JEFF (Name of Person	at (415) <u>298-2707</u> ea Code & Daytime Telepho	one Number	
	rume of reison	Ai	ca code & Daytime Telepin	ine radinoer	
STREET/COURIER ADDRESS:			MAILING ADDRESS:		
New Filing Section			New Filing Section		
Division of Corporations Clifton Building			Division of Corporations P.O. Box 6327		
2661 Executive Center Circle			Tallahassee, FL 32314		
	Tallahassee, FL 32	2301	,		
Enclos	ed is a check for the	following amount:			
\$70	0.00 Filing Fee E	\$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	IOMATIX, INC.					_
	(Enter name of corporate "Inc.," "Co.," "Corp." "I		D,	"COMPANY," "CORPORATION,"		
	(If name unavailable in	Florida, enter alternate corporate nar	ne	adopted for the purpose of transacting business in	Florida)	-
2	. NV		3.	E0175022006-2		_
	(State or country under the	he law of which it is incorporated)		(FEI number, if applicable)		-
4	03/10/2006		5.	PERPETUAL		
	(Date of inco	rporation)		(Duration: Year corp. will cease to exist or "per	petual")	
6	,					_
				Florida, if prior to registration)		
			.15	02, F.S., to determine penalty liability)		
7	75 CEDAR ST. APT B	SAINT AUGUSTINE, FL 32084			•	-
		(Principal office a	aar	ess)		
	75 CEDAR ST. APT B	SAINT AUGUSTINE, FL 32084				· i*
		(Current mailing a	ıddı	ess)		J.
0	TO BUILD WED OUTE	S AND WED DAGED COUTWAR		OD BLIGINEGGEO		•
ð		S AND WEB BASED SOFTWARE poration authorized in home state or		untry to be carried out in state of Florida)		-
^	•				©	
9.	. Name and street addre	ess of Florida registered agent: (F	³.O	. Box NOT acceptable)	HAY	Jan Alli
	Name: JEFF	CHARETTE			24	
О	Office Address: 75 C	EDAR ST. APT B			P	
	SAIN	T AUGUSTINE		, Florida <u>32084</u>	2 2:5	
	-	(City)		(Zip code)	60	

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.

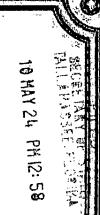
(Registered agent's signature)

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:	10 MAI
A. DIRECTORS	2 2
Chairman: JEFF CHARETTE	F A
Address: 75 CEDAR ST. APT B	7 To 10 To 1
SAINT AUGUSTINE, FL	5
Vice Chairman: JEFF CHARETTE	
Address: 75 CEDAR ST. APT B	•
SAINT AUGUSTINE, FL	
Director: JEFF CHARETTE	
Address: 75 CEDAR ST. APT B	
SAINT AUGUSTINE, FL	
Director: JEFF CHARETTE	
Address: 75 CEDAR ST. APT B	
SAINT AUGUSTINE, FL	
B. OFFICERS	
President: JEFF CHARETTE	
Address: 75 CEDAR ST. APT B	
SAINT AUGUSTINE, FL	
Vice President: JEFF CHARETTE	
Address: 75 CEDAR ST. APT B SAINT AUGUSTINE, FL	
75 CEDAR ST. APT B SAINT AUGUSTINE, FL	
Secretary: JEFF CHARETTE	
Address: 75 CEDAR ST. APT B SAINT AUGUSTINE, FL	
Treasurer: JEFF CHARETTE	
Address: 75 CEDAR ST. APT B SAINT AUGUSTINE, FL	
NOTE: If necessary you may attach an addendum to the application listing additional officers and/or of 13. (Signature of Director or Officer listed in number 12 of the application)	lirectors.
14. JEFF CHARETTE PRESIDENT	

(Typed or printed name and capacity of person signing application)





CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **IOMATIX**, **INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since March 10, 2006, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on May 21, 2010.

ROSS MILLER Secretary of State

Electronic Certificate
Certificate Number: C20100521-0542
You may verify this electronic certificate
online at http://www.nvsos.gov/