

F10000004740

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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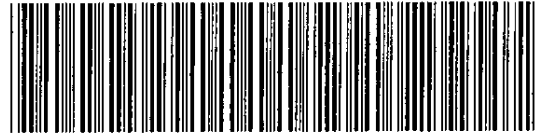
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/27/10--01003--024 **87.50

RECEIVED
10 OCT 27 AM 10:37
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
10 OCT 27 AM 8:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
11/1



CORPORATION SERVICE COMPANY

FILED

10 OCT 27 AM 8:34

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ACCOUNT NO. : I20000000195

REFERENCE : 552471 5160889

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : October 22, 2010

ORDER TIME : 4:22 PM

ORDER NO. : 552471-005

CUSTOMER NO: 5160889

FOREIGN FILINGS

NAME: IPN USA CORPORATION

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kimberly Moret -- EXT# 2949

EXAMINER: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 28, 2010

CSC
ATTN: KIMBERLY MORET
WALK-IN

SUBJECT: IPN USA CORPORATION
Ref. Number: W10000050560

RESUBMIT
Please give original
submission date as file date.

We have received your document for IPN USA CORPORATION and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

Please remove the corporation name from the alternate name line.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap
Regulatory Specialist II

Letter Number: 210A00025442

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10 OCT 29 AM 10:38
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**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. IPN USA Corporation
(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)

2. Georgia 3. 58-2477450
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 6/10/99 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 700 Dividend Dr. Suite 500 Peachtree City GA
(Principal office address) 30269-1962

700 Dividend Dr Suite 500 Peachtree City GA 30269-1962
(Current mailing address)

8. FOR PROFIT Corporation
(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)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(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.

Kimberly B. Moret
(Registered agent's signature) as its agent

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TALLAHASSEE FLORIDA

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

Chairman: LAURENS LAST

Address: 700 Dividend Dr Suite 500
Peachtree City GA 30269-1962

Secretary
Vice Chairman: PAUL VAN DEN HOONAARD

Address: 700 Dividend Dr Suite 500
Peachtree City GA 30269-1962

Director: LUIS DE LA MORA

Address: 700 Dividend Dr Suite 500
Peachtree City GA 30269-1962

Director: _____

Address: _____

B. OFFICERS

President: CEO LAURENS LAST

Address: 700 Dividend Dr Suite 500
Peachtree City GA 30269-1962

Vice President: _____

Address: _____

Secretary: PAUL VAN DEN HOONAARD

Address: 700 Div. Dr. Suite 500 Peachtree City GA 30269-1962

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. LUIS DE LA MORA - DIRECTOR
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Control No. K924363

STATE OF GEORGIA

Secretary of State

Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

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TALLAHASSEE FLORIDA

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

IPN USA CORPORATION

Domestic Profit Corporation

was formed or was authorized to transact business on 06/10/1999 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 22nd day of October, 2010

B. P. Kemp

Brian P. Kemp
Secretary of State