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

Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Direct Connect Name of corporate	by Owner, Inc.	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good S above referenced foreign corporation to transact bus	Standing" and check are submitted to registe	
Please return all correspondence concerning this ma	7	····
Direct Connect	Gof Person Sylvaer Company	
S315 N C	Clark St. #101	
Chicago	TL 60640	
	te and Zip code 9 horoper fies. Cored for fature annual report notification)	1
For further information concerning this matter, please	se call:	
George Just at (77. Name of Person Ar.	rea Code & Daytime Telephone Number	- 2 0
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	VISION OF CORPORATION
Enclosed is a check for the following amount: \$70.00 Filing Fee \$\simega\$ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & □ \$87.50 Filing Fee & Certified Copy Certificate Certified Cert	ing Fee, e 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. Direct Connect By Owner 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) (State or country under the law of which it is incorporated)

3. 21-3075377

(FEI number, if applicable) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) N Clark St. #101
(Principal office address) (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

The Illinois Business Corporation and street address of Florida registered agent: (P.O. Box NOT acceptable) 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: 2 Hallandale Block Blod #612 Office Address: Black, Florida 33009 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.

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

FILLED SECRETARY OF STAFL DIVISION OF CORPORATION

A. DIRECTORS

A. DIRECTORS	2011 JAN 18 PM 4: 30
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
I	
Address: 5315 N Clark St. 4/01	
Chicago, IL 60640	
$\mathcal{L}_{\mathcal{A}}(\mathcal{A},\mathcal{A})$	
Chicago, 16 60640	
0.1.	
Address: 5315 N. Clan #101, Chicago IL	· · · · · · · · · · · · · · · · · · ·
9	
Treasurer:	
Address:	
NOTE: If negestary, you may anach an addendum to the application li	isting additional officers and/or directors.
Hugas V	
(Signature of Director or Officer listed in number	r 12 of the application)
14. Steven J Programme and capacity of person	ned Connect By Owner, Inc.
(Typed or printed name and capacity of person	signing application)



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

DIRECT CONNECT BY OWNER, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JULY 16, 2010, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



Authentication #: 1027701262

In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 4TH

day of

OCTOBER

A.D.

2010

Desse White

Authenticate at: http://www.cyberdriveillinois.com

SECRETARY OF STATE