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### **COVER LETTER**

TO: **New Filing Section** Division of Corporations Qualification of Foreign Corporation Name of corporation - must include suffix Dear Sir or Madam: The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida. Please return all correspondence concerning this matter to the following: Todd Deluca Name of Person Aegom Interactive Inc Firm/Company 10 Prince Place Suite 201 Address Newburyport, MA 01950 City/State and Zip code todd@aegom.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Todd Deluca Area Code & Daytime Telephone Number Name of Person **MAILING ADDRESS:** STREET/COURIER ADDRESS: **New Filing Section New Filing Section Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount: 70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & **1\$**87.50 Filing Fee, Certificate of Status & Certificate of Status Certified Copy 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.

		orate name adopted for the purpose of transacting business in	Florida)
Massachu		3. <u>2701170764</u>	<del> </del>
•	under the law of which it is incorpo	orated) (FEI number, if applicable)	
10/2009		5. Perpetual	
	e of incorporation)	(Duration: Year corp. will cease to exist or "perp	etual")
9/6/2011			
		d business in Florida, if prior to registration) 10 & 607.1502, F.S., to determine penalty liability)	
10 Prince F	Place Suite 201, Newbu		
·		l office address)	<del></del>
	•		
10 Prince	e Place Suite 201	Newburyport MA 01950	
10 Princ		Newburyport, MA 01950 mailing address)	<del></del>
10 Prince			
I have an e	Current remployee who will sell to	o the southern states	
I have an e	Current remployee who will sell to	mailing address)	
I have an (Purpose)	(Current remployee who will sell to so of corporation authorized in home	o the southern states	
I have an e (Purpose)	(Current remployee who will sell to s) of corporation authorized in home et address of Florida registered a	o the southern states e state or country to be carried out in state of Florida)	
I have an e	Current remployee who will sell to s) of corporation authorized in home et address of Florida registered a Barbara Bianchi	o the southern states e state or country to be carried out in state of Florida)	70
Purpose(  Name and stree  Name:	(Current remployee who will sell to s) of corporation authorized in home et address of Florida registered a	o the southern states e state or country to be carried out in state of Florida)	72 F
Purpose(  Name and streeth	Current remployee who will sell to s) of corporation authorized in home et address of Florida registered a Barbara Bianchi	o the southern states e state or country to be carried out in state of Florida) gent: (P.O. Box NOT acceptable)	12 PH 3:
Purpose(  Name and streeth	Current remployee who will sell to s) of corporation authorized in home et address of Florida registered a Barbara Bianchi  338 Algiers Avenue	o the southern states e state or country to be carried out in state of Florida) gent: (P.O. Box NOT acceptable)	12 PH 3
Purpose( Purpose(  Name and street  Name:  Office Address:	Current remployee who will sell to s) of corporation authorized in home et address of Florida registered a Barbara Bianchi  388 Algiers Avenue  Lauderdale By the Se (City)	o the southern states e state or country to be carried out in state of Florida) gent: (P.O. Box NOT acceptable)	
Name and stree  Name:  Office Address:	employee who will sell to s) of corporation authorized in home et address of Florida registered a Barbara Bianchi  Barbara Bianchi  A S Algiers Avenue  Lauderdale By the Se (City)  Ingent's acceptance:  Indeed as registered agent and to acceptance and to acceptance and to acceptance and acceptance and to acceptance and acceptance acceptanc	o the southern states e state or country to be carried out in state of Florida) gent: (P.O. Box NOT acceptable)  ea , Florida 33308 (Zip code)	12 PH 3: 56  at the place
Name and stree  Name:  Office Address:  O. Registered a daving been name esignated in this	employee who will sell to s) of corporation authorized in home et address of Florida registered a Barbara Bianchi  Barbara Bianchi  Barbara Bianchi  City)  Gent's acceptance:  The acceptance and to accept the second accept the s	o the southern states e state or country to be carried out in state of Florida) gent: (P.O. Box NOT acceptable)  ea, Florida 33308 (Zip code)	at the place is capacity.

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: Todd Deluca Address: 12 Court Street, Newburyport, MA 01950 Vice Chairman: Todd Deluca Address: Director: Colleen Deluca Address: 12 Court Street, Newburyport, MA 01950 Director: **B. OFFICERS** President: Todd Deluca Address: Vice President: Colleen Deluca Address: Secretary: Todd Deluca Treasurer: Todd Deluca Address: \_\_\_\_ NOTE: If necessary, you may attach/an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Todd Deluca President

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



Commonwealth

# The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02133

August 31, 2011

TO WHOM IT MAY CONCERN:

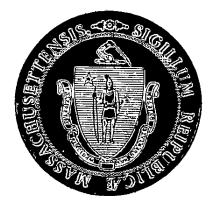
I hereby certify that

## AEGOM INTERACTIVE, INC.

appears by the records of this office to have been incorporated under the General Laws of this Commonwealth on October 20, 2009.

I also certify that so far as appears of record here, said corporation still has legal existence.





In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth
on the date first above written.

Secretary of the Commonwealth

William Travers Galein