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To:

Division of Corporations

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
Fax Number : (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

## FOREIGN PROFIT/NONPROFIT CORPORATION OurStage, Inc.

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## 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.

(Enter name of "Inc.," "Co.," "	corporation; must include "INCORPORA?  Corp., "Inc," "Co," or "Corp.")	ŒD,	" "COMPANY," "CORPORATION,"	<del></del>		
	• ,		·			
(If name uneve	ilable in Florida, enter alternate corporate n	EUTO	adopted for the purpose of transacting business in Flo	rida)		
2. State of Dolaw	'are	3.	20-5713956			
(State or country	y under the law of which it is incorporated)		(PEI number, if applicable)			
4 10/12/2006		5.	Perpetual			
	te of incorporation)		(Duration: Year corp. will cease to exist or "perpetu	ıal")		
6. June 01, 2011						
			n Florida, if prior to registration) 502, F.S., to determine penalty liability)			
7, 321 Billerica Re	oad, Suite 202, Chelmsford, MA 01824					
· · ·	(Principal office	addı	ress) ·			
321 Billerica Ro	ad, Suite 202, Chelmsford, MA 01824					
	(Current mailing	addı	ress)			
			the section to the course to the section			
o	ns website www.ourstage.com, Which prome					
(Purpose)	s) of corporation authorized in home state of	ar co	untry to be carried out in state of Florida)	A	73	
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)				12 JAN	الاراباد ف	
Name:	C T Corporation System			5	=	, 224 (S2)44 12
Office Address:	1200 South Pine Island Road		<u>.</u>	(S)	5	के कर्त्या है। है
	Plantation		33324	- m	AH I	in the second
	(City)	_	, Florida (Zip code)	(C)	<del></del>	Appendix Appendix
	(City)		(2.9 0000)		_	
	gent's acceptance:		a affect one foundly when the day of a second residue and	<b>*</b>		
			e of process for the above stated corporation at ent as registered agent and agree to act in this c			
further agree to c	comply with the provisions of all statute	s re	inthe to the proper and complete performance of	f ne dui	les.	
and I am familiai	r with and accept the obligations of my C T Corporation System	pos		the organization	· Property and	14
	C I Corporation system					
Ву	Maria	10	to to you	iscur <sub>i</sub>	rena Gern	r Chiron
(-	(Rogistored agents signatu	10)		₩ww.co.v.		-wil
Manual Market				A STATE OF THE		a marine
11. Attached is a the Department of	centricate of existence duly authenticate State, by the Secretary of State or other	оff roff	tot more that 90 days prior to delivery of this applical having custody of corporate records in the ju	m <b>cauon 1</b> urisdictio	io a	
under the law of v	which it is incorporated.					

12. Names and business addresses of officers and/or directors:			
A. DIRECTORS			
Chairman: Witham Tumer			-
Address: 321 Billerica Road, Suite 202			ٺ
Chelmsford, MA 01824			_
Vice Chairman:			-
Address:			_
		_	_
Director: Philip Geier		<del>,</del>	<b>-</b>
Address: 321 Billerica Road, Suite 202			_
Cheimsford, MA 01824			-
Director: David Monre			_
Address: 321 Billerica Road, Suite 202		2	C
Chelmsford, MA 01824		- NV	
B. OFFICERS	SSA	φ	į
President: Benjamin Campbell	ries.	E	5
and Different Band Order 200	95 25	••	Ğ
Address: 321 Hitterica Road, State 202 Chelmsford, MA 01824	i i		,
			•
Vice President:			•
Address:			
D. L. C. L	<u> </u>		•
Secretary: Paula Schmitz	<del></del>	<u></u>	
Address: 519 CR 455, Thorndale, TX 76577	,		ı
Treasurer:		,	
Address:			,
NOTE: If necessary, you may attack an addendum to the application listing additional officers and	or directors.		
13. Signature of Director or Officer			
The officer or director signing this document (and who is listed in number 12 above) affirms that the are true and that he or she is aware that false information submitted in a document to the Department third degree felony as provided for in s.817.155, P.S.	facts stated her of State constit	rein tutes a	
Benjamin Campbell President & CEO			

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

## Delaware

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OURSTAGE, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF JANUARY, A.D. 2012.

AND I DO BEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

DATE: 01-05-12