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Florida Department of State
Division of Corporations
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To: Division of Corporations
 Fax Number : (850) 617-6381

From: Account Name : CORPORATE ACCESS, INC.
 Account Number : FCA000000011
 Phone : (850) 222-2666
 Fax Number : (850) 222-1666

12 APR - 3 PM 12:34
SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

Email Address: _____

**FOREIGN PROFIT/NONPROFIT CORPORATION
XTREME MARKETING, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4/4
[Signature]

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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.

1. XTREME MARKETING, 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)

2. Indiana

(State or country under the law of which it is incorporated)

3.

(FEI number, if applicable)

4. April 22, 2009

(Date of incorporation)

5.

The duration of the corporation shall be perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon filing of application

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

7. 1723 Stoutfield E. Drive, Indianapolis, IN 46241

(Principal office address)

1723 Stoutfield E. Drive, Indianapolis, IN 46241

(Current mailing address)

8. Promotional sales of marketing

(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: Ray Chia

Office Address: 5110 Eisenhower Boulevard, Suite 150

Tampa, Florida 33634
(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.



(((H12000086109 3)))

(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.

14. Ray Chia, President

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

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

A. DIRECTORS

Chairman: Ray Chia

Address: 5110 Eisenhower Boulevard, Suite 150
Tampa, Florida 33634

Vice Chairman: same as above

Address: _____

Director: Ray Chia

Address: 5110 Eisenhower Boulevard, Suite 150
Tampa, Florida 33634

Director: _____

Address: _____

B. OFFICERS

President: Ray Chia

Address: 5110 Eisenhower Boulevard, Suite 150
Tampa, Florida 33634

Vice President: same as above

Address: _____

Secretary: same as above

Address: _____

Treasurer: same as above

Address: _____

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

13. Ray Chia President

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.

14. Ray Chia, President

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

((H12000086109 3)))

STATE OF INDIANA
OFFICE OF THE SECRETARY OF STATE
CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

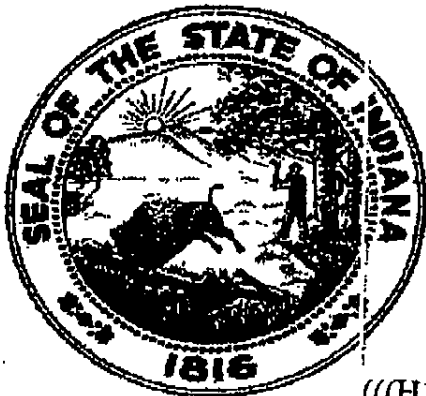
I further certify that records of this office disclose that

XTREME MARKETING, INC.

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on April 22, 2009, and was in existence or authorized to transact business in the State of Indiana on March 29, 2012.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.

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In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Twenty-Ninth Day of March, 2012.

Connie Lawson

CONNIE LAWSON, Secretary of State

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