Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : NRAI CORPORATE SERVICES, INC.-IRVINE

Account Number : I20080000054 Phone

Fax Number

: (949)955-9585 : (800) 562-6504

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 MobileNet Services, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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Corporate Filing Menu

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COVER LETTER

TO;	New Filing Sect Division of Con			
SUBJ	ECT:	Mo	obileNet Services, Inc.	
			tion - must include suffix	
Dear S	Sir or Madam:			
"Certi	ficate of Existence		for Authorization to Transact Standing" and check are submainess in Florida.	
Please	return all corresp	ondence concerning this ma	atter to the following:	
	١	Sop	hy Keo	
		Name	of Person	
		NRAI Cornor	rate Services, Inc.	
			Company	
		2875 Michelle	Drive, Suite 100	
			ddress	
		Invine	CA 92606	
		·	te and Zip code	
		ekan@	Paral.com	
			ed for future annual report no	dification)
For fu	rther information	concerning this matter, plea	se call:	
	Sophy Ke	PO 21 (9	49) 955-9585	
	Name of Person		rea Code & Daytime Telcpho	ne Number
	STREET/COU New Piling Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations g Center Circle	MAILING AI New Filing Sec Division of Co P.O. Box 6327 Tallahassee, FI	ction rporations
Enclo	sed is a check for	the following amount:		
	570.00 Filing Fee	S78.75 Filing Fce & Certificate of Status	\$78.75 Filing Fce & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICA			N FOR AUTHORIZATION TO TH FLORIDA	KANSA EGR	~	
	WITH SECTION 607.1503, FLORIDA . LEIGN CORPORATION TO TRANSACT		TUTES, THE FOLLOWING IS SUBMITS SINESS IN THE STATE OF FLORIDA.	\$S.	10T - 9	7
j. MobileNet Servi	cos, Inc.			mo	0	(1)
	orporation; must include "INCORPORATES orp," "Inc," "Co," or "Corp.")	D," '	"COMPANY," "CORPORATION,"	1500 J	H 4: 25	^D
(If name unavails	able in Florida, enter alternate corporate nati	ne ad	lopted for the purpose of transacting husiness	in Florida	<u>)</u>	
2. California		3, <u>6</u>	1-1419176		_	
(State or country	under the law of which it is incorporated)		(FEI number, if applicable)			
4. 07/02/2002	5	5. P	erpetual			
(Date	of incorporation)		Duration: Year corp. will cease to exist or "p	erpetual"))	
6. Upon Qualificat					_	
			Torida, if prior to registration) 2, F.S., to determine penalty liability)			
			a a toly to dominion patient, nationally,			
7. 18 Morgan, Suite	200, Irvine, CA 92618					
	(Principal office at	adres	18)			
same					_	
	(Current mailing a	ddre	95)			
	Consulting and Testing of corporation authorized in home state or	cour	ntry to be carried out in state of Florida)		_	
9. Name and street	et address of Florida registered agent: (P	P.O.	Box NOT acceptable)			
Name:	NRAI Services, Inc.		_			
Office Address:	515 East Park Avenue					
	Tallahassee		, Florida <u>32301</u>			
	(City)		(Zip code)			
Having been nam designated in this further agree to c	application, I hereby accept the appoin	sme rele	of process for the above stated corporate int as registered agent and agree to act is alive to the proper and complete performation as registered agent.	n this cap	acity.	Į.
	NRAI Services, Inc.					
_	BV: Accelothancel					
	(Registered agent's signatur	re) N	icole Parnell, Assistant Sec	retary	, ·	

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:	₹8 ≾
A. DIRECTORS	
Chairman:	T
Address:	
	#7 3 C
Vice Chairman:	7 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
Address:	• • • • • • • • • • • • • • • • • • • •
Director: Richard Grant	·
Address: 18 Morgan, Suite 200	
Trvine, CA 92618	
Director:	
Address:	
President: RICHARS GRANT Address: 18 Morgan, Suite 200 Irvine, CA 92618	
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing addition	al officers and/or directors.
13. The land Street Divine Comment	
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) are true and that he or she is aware that false information submitted in a document to third degree felony as provided for in s.817.155, F.S.	
14. Richard Grant, President	

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

MOBILENET SERVICES, INC.

FILE NUMBER:

FORMATION DATE:

TYPE:

07/02/2002 DOMESTIC CORPORATION

C2441914

JURISDICTION:

STATUS:

CALIFORNIA ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of . California this day of June 22, 2012.

> **DEBRA BOWEN** Secretary of State