Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000183523 3)))



H120001835233ABC7

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-0821 Fax Number : (850)558-1515

d for future

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 XBAND ENTERPRISES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

~ 07/17/12

Electronic Filing Menu

Corporate Filing Menu

Help

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. XBAND ENT	TERPRISES, INC.					
	orporation; must include "INCORPORAT	ED,	" "COMPANY," "CORPORATION,"		_	
"Inc.," "Co.," "C	orp," "Inc," "Co," or "Corp.")					
						
(If name unavail	able in Florida, enter alternate corporate na	ame	adopted for the purpose of transacting business in F	lorida	.)	
2. Nevada		_ 3.				
(State or country	under the law of which it is incorporated)		(FEI number, if applicable)			
4. 01/27/2009		5.	Perpetual			
(Date	of incorporation)		(Duration: Year corp. will cease to exist or "perpe	stual"))	
6.					_	
			n Florida, if prior to registration) 502, F.S., to determine penalty liability)			
7. 4209 Bay Clu	b Circle Tampa,FL,33607					
	(Principal office	add	ress)			
4209 Bay Clu	b Circle Tampa,FL,33607					
	(Current mailing	add	ress)		_	
8. Network servi	ices, cloud computing, data protection	on,	disaster recovery, security, technology-cons puntry to be carried out in state of Florida)	ulting	g	
(Purpose(s	s) of corporation authorized in home state	or c	ountry to be carried out in state of Florida)	≓g. Fire	2	
9. Name and street	et address of Florida registered agent:	(P.¢	D. Box NOT acceptable)	- dra - :	\equiv	ets,
Name:	Corporation Service Company			27 f 3 ● 27 m • 18 m		೭೪೩೫
Name:	ooxperiment out view company			žik ne	9	i duri
Office Address:	1201 Hays Street		<u></u>	T	7	77 T
	Tallahassee		, Florida 32301	31 - 64		,
	(City)		(Zip code)	<u> </u>	ф С	
10 70 14 1			, The	10 T#1.11	Ŋ	
	gent's acceptance: ned as registered agent and to accept s	erv.	ice of process for the above stated corporation	at the	e nlac	e
			ment as registered agent and agree to act in th			
			relative to the proper and complete performance	ce of i	my du	ties,
ana I am familia	r with and accept the obligations of m	у рс	osution as registerea agent.			
	Corporation Service Company					
_1			Asst VP			
•	(Registered agent's signat	ture))			

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: Ahmed Sharaf	
Address: 4209 Bay Club Circle Tampa, FL 33607	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	-i
Address:	<u> </u>
B. OFFICERS	क कि
President: Ahmed Sharaf	The TO THE
Address: 4209 Bay Club Circle Tampa, FL 33607	E44 : 152
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	·····
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officers	and/or directors.
13. A July 7/ 15/2012	<u> </u>
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that are true and that he or she is aware that false information submitted in a document to the Depart third degree felony as provided for in s.817.155, F.S.	at the facts stated herein ment of State constitutes a
14. Ahmed Sharaf, President	







CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **XBAND ENTERPRISES**, **INC**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since January 27, 2009, and is in good standing in this state.

Craws (1)

Electronic Certificate
Certificate Number: C20120713-2154
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on July 13, 2012.

ROSS MILLER Secretary of State