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COVER LETTER

TO:		Section Corporations	
SUBJ	ECT:	MEDIATRA	ACKERS WISCONSIN, INC.
	2011		ration - must include suffix
Dear S	ir or Madam:		
"Certif	icate of Existe		rofit Corporation for Authorization to Conduct its Affairs in Floridal Standing" and check are submitted to register the above referenced Florida.
Please	return all corre	spondence concerning this	matter to the following:
		GE	ORGE E. MILLER, ESQ.
			Name of Person
		NONF	ROFIT SERVICE GROUP
			Firm/Company
		200 NOR	TH GLEBE ROAD, SUITE 315
			Address
4		AF	THE TON WA COOO
·	*,		RLINGTON, VA 22203 City/State and Zip Code
			· · · · · · · · · · · · · · · · · · ·
			NPROFITSERV.COM
	E-1	nail address: (to be used fo	r future annual report notification)
For furt	her information	o concerning this matter, pl	ease call:
	CAROLY	N A. EMIGH a	t (703) 528-7525 ext. 2
	. Name	of Person	Area Code & Daytime Telephone Number
			•
	MAILING AI New Filing Se		STREET/COURIER ADDRESS: New Filing Section
	Division of Co		Division of Corporations
	P.O. Box 6327		Clifton Building
	Tallahassee, F	L 32314	2661 Executive Center Circle
			Tallahassee, FL 32301
Enclose	d is a check for	the following amount:	
₹] \$70.	00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1.		MED	IA TRACKERS	S WISCONS	<u> </u>		
9	Name of con	poration: must include the w	ord "INCORPORATE	ID" or "CORPOR	ATION" or words or abbu	eviations of like	
i	n the name at	MED coration: must include the w uage as will clearly indicate present. "Company" or "Co	" may not be used as	a corporate suffix	by a nonprofit corporation	v)	
2.		WISCONSIN					
٠.	(State or co	untry under the law of which	h it is incorporated)	(FI	27-3535978 31 number, if applicable)		
4.		AUGUST 26, 201	5 .		PERPETUAL corp. will coase to exist of		
•••	(AUGUST 26, 2010 (Date of Incorporation)		(Duration: Year	corp. will cease to exist o	r "perpetual")	
б.			NONE TO	DATE			
0.	Date first con	ducted affairs in Florida if pr	ior to registration. See s	ections 617.1501	& 617.1502, F.S, to determ	ine penalty liability.)	
7	115	01 NORTH PORT W	ASHINGTON RO	AD, SUITE C	30, MEQUON, WI	53902	
			(Principal of	nce address)		4	
	1150	01 NORTH PORT W	ASHINGTON RC	AD, SUITE G	30, MEQUON, WI	53902	
-			(Current m	ailing address)			
Q	TO PROM	OTE FACTS AND IN	ITELLECTUAL B	ALANCE IN F	PUBLIC DISCOURS	SE IN THE M	
(Purpose(s) of	corporation authorized in l	ome state or country t	o be carried out in	the state of Florida)		
0 1		, 	-i-tdt- (T. O. O.	Dow MOT noon	اهالمامه		بد
9. 3	vame and gr	reet address of Florida re	gisteren agent: (P.O.	DOX MANT SCCO	prante)	ু ভ	
		NEAT CEDVICES	NO			7 Vis	SE
	Name:	NRAI SERVICES, I	NO.			A STOCK	S
ΩÐ	ion Address	515 EAST PARK A	VENUE			AUG 13	> ⊤
Щ	Toe Walless	. 010 27.01 . 7.1		-		<u> </u>	32,5
		TALLAHASSEE,		, Florida	32301	2 8	
		(C	ity)		(Zip Code)	f. 3	S Z
							STATE
10 H a	. Registere vino hoen n	d agent's acceptance: amed as registered agent	and to accept servi	ce of process for	· the above stated corpo	ration at the place	ਰੰਨ ਹ
des	ionated in ti	his application. Thereby	accent the appointm	i <i>ent as registere</i>	d agent and agree to ac	et in this capacity. I	Ţ
fur	ther agree u II am famil	o comply with the provisi iar with and accept the o	ons of all statutes re bligations of my pos	elative to the pro sition as register	per ana complete perjo red avent.	rmance of my autic	es,
	y	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,		
			/////				
					<u>/</u>	_	
			(Registered at	cont's signature	Dang Nguyen, Asst. Sed	cretary	
11,	Attached is	a certificate of existence ment of State, by the Secr	duly authenticated,	not more than 9	O days prior to delivery	of this application to	0
	jurisdiction	nent of State, by the Sect under the law of which i	t is incorporated.	er omener maami	g custody or outporate r	Come in the	
	→		-				

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

À	DIRECTO	ю	
		T	3

Chairman: NED RYUN		
Address: 17341 PICKWICK DRIVE, SUITE A		
PURCELLVILLE, VA 20132		
Vice Chairman: DREW RYUN, PRESIDENT		_
Address: 17341 PICKWICK DRIVE, SUITE A		
PURCELLVILLE, VA 20132		
Director: PETER SAMUELSON, SECRETARY/TREASURER		
Address: 899 SOUTH COLLEGE MALL ROAD, SUITE 362		
BLOOMINGTON, IN 47404		
Director: JOHN EDDY		
Address: 17341 PICKWICK DRIVE, SUITE A		
PURCELLVILLE, VA 20132		
B. OFFICERS		
President: DREW RYUN		_
Address: 17341 PICKWICK DRIVE, SUITE A		·
PURCELLVILLE, VA 20132		_
Vice President:	12	IAIB
Address:	AUG.	CRET
	ဩ	ARY OF CO
Secretary: PETER SAMUELSON	PH 1	RY OF S
Address: 899 SOUTH COLLEGE MALL ROAD, SUITE 362, BLOOMINGTON, IN 47404		ATIO
Treasurer: PETER SAMUELSON		— %
Address: 899 SOUTH COLLEGE MALL ROAD, SUITE 362, BLOOMINGTON, IN 47404		_
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or director. 13	rs.	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. DREW RYUN PRESIDENT		
(Typed or printed name and capacity of person signing application)		

United States of America State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS





To All to Whom These Presents Shall Come, Greeting:

I, PAUL M. HOLZEM, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

MEDIA TRACKERS WISCONSIN, INC.

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is August 26, 2010.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis, Stats., and that it has not filed articles of dissolution.

IN TESTIMONY WHEREOF, I have hereunts det

my hand and affixed the official seal of the Department on July 11, 2012.

PAUL M. HOLZEM, Administrator Division of Corporate and Consumer Services Department of Financial Institutions

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/verify/

Enter this code:

108587-4C43F102