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DIVISION OF CORPORATIONS

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FLORIDA DEPARTMENT OF STATE

Division of Corporations

SECRETARY OF STATE TALL AHASSEE, FLORIDA

January 29, 2013

ZACH BEASLEY P O BOX 3060 TUPELO, MS 38803

SUBJECT: THE CELLPHONE SUPERSTORE, INC

Ref. Number: W13000005616

We have received your document for THE CELLPHONE SUPERSTORE, INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Pamela Smith Regulatory Specialist II

Letter Number: 413A00002198

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: THE CELLPHONE	- SUPERSTORE, INC.
Name of cor	poration - must include suffix
Dear Sir or Madam:	
	ation for Authorization to Transact Business in Florida," good Standing" and check are submitted to register the ct business in Florida.
Please return all correspondence concerning th	is matter to the following:
ZACH BEAGUE	•
N	Name of Person
THE CELLPHONE	SUPERSTORE, INC.
	irm/Company
Po Box 3040	
	Address
TWELD MS 386	03
	y/State and Zip code
ZACHREALE-TOTHE	ECELPHONESUPERSTORE, NET
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter,	, please call:
Zacu Beaslan at (1	142 BO1-3000
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
\$70.00 Filing Fee	

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 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) (State or country under the law of which it is incorporated) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) :30(a0) (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: Office Address: 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.

(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.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: Vice Chairman: _ Address: __ Director: Address: Address: B. OFFICERS Prosident: Ki Address: Vice President: Address: _V_ Address: P.O. BOX 3040, Tupe 10, MS 38803 Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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

Typed or printed name and capacity of person signing application)

a third degree felony as provided for in s.817.155, F.S.

State of Mississippi

Office of the Secretary of State C. Delbert Hosemann, Jr., Secretary of State Jackson, Mississippi

CERTIFICATE

I, C. DELBERT HOSEMANN, JR., Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on February 22, 2007, the State of Mississippi issued a Charter/Certificate of Authority to:

THE CELLPHONE SUPERSTORE, INC

That the state of incorporation is MISSISSIPPI.

That the period of duration is perpetual.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

STATE OF MISSES

Given under my hand and seal of office January 22, 2013

Hosencem, dr.

C. Delbert Hosemann, Jr. Secretary of State

Certification Number: 12861464-1 Page 1 of 1 Reference: Verify this certificate online at https://business.sos.state.ms.us/corp/soskb/verify.asp