F13000002273

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cil	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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13 MAY 28 PM I2: 50 ELIPET ARY OF STATE ALL ALLASSEE, FLORID.



360-221-4001

State of Florida Division of Corporation PO Box 6327 Tallahassee, Fl 32314

To Ms. Tina Roberts:

Per our phone conversation on April 30, I have enclosed 2 applications; withdrawal application and foreign corporation application.

We have dissolved our California corporation status for Fusionspark Media, Inc. and opened Washington Corporation under the same name, Fusionspark Media, Inc.

We would like to request that the State of Florida process first the completion of a withdrawal of FusionSpark Media, Inc. as a California corporation in Florida and, secondly, simultaneously open FusionSpark Media, Inc. as a Washington corporation in Florida.

Sincerely,

Noriko Sparkman, Secretary

Fusionspark Media, Inc.

HAY 28 PH 12: 50

Process This Application 2nd.

COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: Fusionspa	ark Media	a, Inc.		
		tion - must include su	ffix	
Dear Sir or Madam:				
The enclosed "Application by For "Certificate of Existence," or "Cer above referenced foreign corporate	tificate of Good	Standing" and check a		
Please return all correspondence c	oncerning this ma	atter to the following:		
Noriko Sparkmar	1			
		of Person		
Fusionspark Med	lia, Inc.			
	 	Company		
PO Box 409				
	A	ddress		
Langley, WA 982	60			三 3
		te and Zip code	· · · · · · · · · · · · · · · · · · ·	120 2 -
noriko@fusionspar	k.com √			7 28 ration) FRO 19
E-mail	address: (to be us	sed for future annual r	eport notific	ation) 🛗 👨
For further information concerning	g this matter, plea	ase call:		7 F. S. 3 F. S
			~ .	3 MAY 28 PM 12: 50
Noriko Sparkmar		0 <u>, 221-40</u>		
Name of Person	Aı	rea Code & Daytime	Felephone N	umber
STREET/COURIER AD New Filing Section Division of Corporations Clifton Building 2661 Executive Center Cit Tallahassee, FL 32301		New Fil Division P.O. Bo	NG ADDRE ling Section n of Corpora x 6327 ssee, FL 323	tions
Enclosed is a check for the follow	ing amount:			
	75 Filing Fee & ificate of Status	□ \$78.75 Filing For Certified Copy		\$87.50 Filing Fee, Certificate of Status & Certified Copy

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.

(If name unavait	oble in Florida, enter alternate comovate game	adopted for the gumose of transacting business in	Florida)	
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida Washington 3 94-3341714		rionday		
*	under the law of which it is incorporated)	(FEI number, if applicable)		
2/13/20	• *	5. perpetual		
	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")		
N/A	,		,	
		n Florida, if prior to registration)		
		502, F.S., to determine penalty liability)		
<u> 1112 Ce</u>	dar Circle, Langley, W	A 98260		
	(Principal office add			
PO Box	409, Langley, WA 9826	(0		
	(Current mailing add	iress)		
multimo	dia communication co	ndoos		
'	edia communication se		· · ·	
/D.—/-) of corporation authorized in nome state or co	Juntry to be earned out in state of Pionus)	· 🗐 🐺 -	
•		* ش		
•	et address of Florida registered agent: (P.	O. Box NOT acceptable)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	et address of Florida registered agent: (P. Kathleen Byars	O. Box NOT acceptable)	N 28	
Name and street	Kathleen Byars		HAY 28 PHI	
Name and street	Kathleen Byars 17774 NW 239th Ter		N 28 PM 12: 5	
Name and street	Kathleen Byars 17774 NW 239th Ter High Springs		N 28 PM 12: 50	
). Name and street	Kathleen Byars 17774 NW 239th Ter		N 28 PM 12: 50	

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.

(Registered agent's signature)

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

	ECTORS			
	Russell Sparkman		··· ····	
Address:	1112 Cedar Circle, Langley WA 98260			
			·——-	
Vice Chai	rman:			
Address:				
	Kevin Sparkman			
Address:	128 Bracken Road, Medford, NJ 08055			
Director:				
Address:	· · · · · · · · · · · · · · · · · · ·			
	Russell Sparkman 1112 Cedar Circle, Langley, WA 98260			
Vice Presi	Kevin Sparkman	<u> </u>	3 —	• • • • • • • • • • • • • • • • • • • •
	128 Bracken Road, Medford, NJ 08055		\Y 28	
.	Noriko Sparkman	H 9: ST	PH 12:	ED
-	1112 Cedar Circle, Langley, WA 98260		50	*******
Treasurer:	Russall Sparkman	<u> </u>		
Address:	1112 Cedar Circle, Langley, WA 98260			
NOTE:	If necessary you may attach an addendum to the application listing additional officer	rs and/or directo	ors.	
are true a a third de	Signature of Director or Officer ver or director signing this document (and who is listed in number 12 above) affirms the signature of the document to the Department of Director or Officer Signature of Directo			



Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION OF FUSIONSPARK MEDIA, INC.

I FURTHER CERTIFY that the records on file in this office show that the above named Profit Corporation was formed under the laws of the State of WA and was issued a Certificate Of Incorporation in Washington on 2/13/2013.

I FURTHER CERTIFY that as of the date of this certificate, FUSIONSPARK MEDIA, INC. remains active and has complied with the filing requirements of this office.

Date: May 14, 2013

UBI: 603-282-410



MARKE.

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Kim Wyman, Secretary of State