F95000000278

Document Number (if known)

C T CORPORATION SYSTEM
Requestor's Name
1311 Executive Center Drive, ste. 200
Address
Tallahassee, FL 32301 (904) 656-0290
City State Zip Phone

600001001 3 ... 01/18/95--01082--011 *****70.00 *****70.00

CORPORATION(S) NAME

... 01/18/95--01133--001 ******8.75 ******8.75

Internet Financial Network, Inc

(X) Profit
( ) NonProfit
( ) Amendment
( ) Merger
(X) Foreign
( ) Dissolution/Withdrawal
( ) Mark
( ) Limited Partnership
( ) Reinstatement
( ) Annual Report
( ) Reservation
( ) Other
( ) Change of R.A.
( ) Fictitious Name
( ) Certified Copy
( ) Photo Copies
( ) CUS
( ) Call When Ready
(X) Walk In
( ) Mail Out
( ) Call if Problem
( ) Will Wait
( ) After 4:30
(X) Pick Up

95 JAN 18 PM ... SECRETARY OF STATE DIVISION OF CORPORATIONS

Name Availability
Document Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

3:00
1-18-95

PLEASE RETURN EXTRA COPY(S) FILE STAMPED

CR2E031 (1-89)

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. Internet Financial Network, Inc.
(Name of corporation: must include the word "INCORPORATED," "COMPANY," or "CORPORATION" or words or abbreviations of like import in language, as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Delaware
(State or country under the law of which it is incorporated)

3. November 7, 1994
(Date of Incorporation)

4. Perpetual
(Duration)

5. Applied
(Federal Employer Identification number, if applicable)

6. Upon Qualification
(Date first transacted business in Florida. See sections 607.1501, 607.1502, and 817.155, F.S.)

7. 3921 S.W. 47th Avenue, Suite #1011, Davie, Florida 33316
(Current mailing address)

8. To provide computer software and financial information.
(Brief description of the nature of the business in which it is engaged in the state of Florida)

9. Names and street addresses of officers and or directors:

A. **Directors:**

Chairman: Richard Bennett
Address: 28 Vesey Street, Suite 2195
New York, New York 10007

Vice Chairman: Marc Strausberg
Address: 40 East 66th Street, Suite 4B
New York, New York 10021

Director: Clifford T. Boro
Address: 3921 S.W. 47th Avenue, Suite #1011
Davie, Florida 33316

Director:
Address:

(FLA.-2189 - 2/1/92)

9. Officers:

President: See attached list of officers

Address: _____

_____

Vice President: _____

Address: _____

_____

Secretary: _____

Address: _____

_____

Treasurer: _____

Address: _____

_____

(if needed, you may attach an addendum to the application listing additional officers and/or directors.)

10. **Name and Street address of Florida registered agent:**

Name: C T Corporation System

Office Address: c/o C T Corporation System, 1200 South Pine Island Road

Plantation ,Florida 33324

Zip Code

11. **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: C T Corporation System

LAUREN H. KREATZ

SPECIAL ASST. SECRETARY

(Typed Name and Title of Officer)

12. 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.

13. Marc Strausberg

(Signature of Chairman, Vice Chairman, or any officer listed in number 9 of the application)

14. Marc Strausberg, President

(Name and capacity of person signing application)

(FLA.-2189)

Appendix to Florida
Application by Fgn. Corp. for Authorization to Transact Business in Florida

Officers of
Internet Financial Network, Inc.

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1. Clifford T. Boro, Co-President, Secretary
   3921 S.W. 47th Avenue, Suite #1011
   Davie, Florida 33316

2. Marc Strausberg, Co-President, Treasurer
   40 East 66th Street, Suite 4B
   New York, New York 10021

3. Thomas M. S. Homnes, Assistant Secretary
   One Post Office Square
   Boston, Massachusetts 02109

State of Delaware

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INTERNET FINANCIAL NETWORK, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWELFTH DAY OF JANUARY, A.D. 1995.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

95 JAN 13 PM 12:51

Edward J. Freel, Secretary of State

2446415 8300

950008860

AUTHENTICATION: 7372819

DATE: 01-12-95

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
96 OCT -2 PM 12:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F95000000278

1. Corporation Name

INTERNET FINANCIAL NETWORK INC.

Principal Place of Business	Mailing Address
3921 S.W. 47TH AVENUE SUITE #1011 DAVIE FL 33316	3921 S.W. 47TH AVENUE SUITE #1011 DAVIE FL 33316

If above addresses are incorrect in any way, line through incorrect information and enter correction below

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

REINSTATEMENT 96

4. Date Incorporated or Qualified To Do Business in Florida: 01/18/1995

5. FEI Number: ~~APPLIED FOR~~ 65-0840949 — ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ — $8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
PSDT	BORO, CLIFFORD T	3921 S.W. 47TH AVENUE, STE 1011	DAVIE FL
~~PTD~~	~~STRAUSBERG, MARC~~	~~40 EAST 88TH STREET, STE 4B~~	~~NEW YORK NY~~
AS	HEMNES, THOMAS M	1 POST OFFICE SQUARE	BOSTON MA
CD	BENNETT, RICHARD	28 VESEY STREET, STE 2195	NEW YORK NY

400001376324--8
-10/16/96--01028--017
****375.00 ****375.00
10-15-96

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, Etc. City / State: FL / Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Barbara A Burke — BARBARA A. BURKE SPECIAL ASSISTANT SECRETARY — Date: 9 30 96
REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐ (See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: [signature] — 9/26/96 Date — 954-321-6061 Daytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
CLIFFORD T. BORO

CR2E040 (7/96)

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