F98000003677

_	ation/Tax Lien Section of Corporations		• • • • • • • • • • • • • • • • • • •
SUBJECT:	IPP, /NO		-
	(Name	e of corporation - must inclu	de suffix)
Dear Sir or Mada	ım:		
The enclosed "Ap" "Certificate of Extransact business		tion for Authorization to Traitted to register the above re	ansact Business in Florida", ferenced foreign corporation to
Piease return all o	correspondence concerning thi	s matter to the following:	
	MARUN	A. Morr	15
_	I.PP.	A Moren Name of Person)	
		Firm/Company)_	*****70.00 *****70.00
_	20 KIVD	RUEN DR.	
		(Address)	•
_	WAYNE, N	<u> </u>	17673
	, , , , , (City/State/Zip)	
Should you need	to call someone concerning th	is matter, please call:	
KERI	A. MARTINEZ at (973,696-J	808
(Name o	f Person)	(Area Code & Daytime To	elephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

SECRETARY OF STATE DIVISION OF CORPORATIONS
98 JUN 29 AM 8: 39



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 15, 1998

MARVIN A. MORRIS I.P.P. LP 22 RIVERVIEW DR WAYNE, NJ 07470

SUBJECT: I.P.P., INC.

Ref. Number: W98000013673

We have received your document for I.P.P., 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):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the CORPORATE SPECIALIST indicated.

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) 487-6092.

Hart Collins Senior Corporate Section Administrator

Letter Number: 998A00033185

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned MARYIN A MORRIS, do hereby certify	
that this Resolution of the Board of Directors of PP, NC	_
(Corporate Name)	_
a corporation duly organized and existing under the laws of the State of New Versey, was duly adopted on Jone 17,	.
Be it resolved, that	,
organized and existing in the State of New Jersey, hereby adopts the name IN Person Payments Company for use in Florida	·• ·
Dated: 6/17/98	SECRETARY SECRETARY
Signature of either Chairman, Vice Chairman or any officer	OF STATE
Marunut Morris	NS

INHS19(4/96)

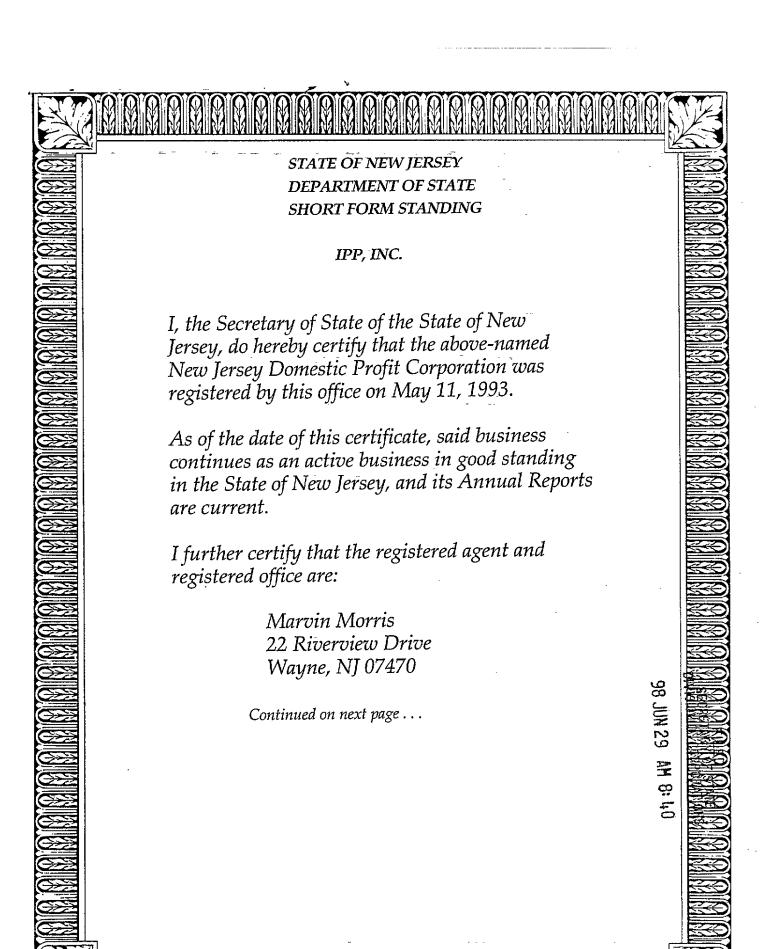
ŧ

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE REGISTER A FOR	WITH SECTION 607.1503, FLORIL REIGN CORPORATION TO TRANSA	DA STATUTES, THE ICT BUSINESS IN T	E FOLLOWING THE STATE OF	7 IS SUBMITTE 7 FLORIDA.	ŒD TO -	•
I. I.P.	_ /	•		п	[bod :	(\:\v- <u>\</u>
(Name of corpora	ation; must include the word "INCORPO ations of like import in language as will partnership if not so contained in the na	clearly indicate that it	NY", "CORPOR t is a corporation	ATION" or		Q
	JERSEY	3. 2 Dev petus Duration: Year corp. v	2-332	15769		
(State or country	under the law of which it is incorporated	l) Oersalu	(FEI number, i	п аррисавіе)		
4 5-11	1-93 5.	Jack Beron	 			-
					,	
6. ///	TAPRCICABLE transacted business in Florida.) (SEE SE	- CONTROL COR 1801 C	07 1800 1 010	7 155 T.C.)		_
		2 2 2	0/1502 and 81	/.1 33, F.S.)		
7. 23	RUSINUISW DR	· ·	-			_
WAYN	12 NJ 0747 (<u> </u>				
	(Current mailin	g address)				
8. // (Purpose(s	Transmit Mo	いとソ te or country to be carr	ried out in state	of Florida)		
· - ·	et address of Florida registered ag					DIN
Name:	Stephen Murphy	·-			98 J	SECI
Office Address:	520 Crown Oak Centre Drive	e			JUN 29	RETARY OF O
	Longwood	, Florida,	32750 (Zip code)		=	\$ 2 8
•		· · · · · · · · · · · · · · · · · · ·	(Zip code)		ထဲ	STA AA
10. Registered a	gent's acceptance:				39	TE NS
in this application, comply with the pr	d as registered agent and to accept serv. I hereby accept the appointment as reg ovisions of all statutes relative to the pro gations of my position as registered age	istered agent and agr oper and complete per ent.	ee to act in this	capacity. I furth	her agre	e to
	(Registered age	ent'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. Name	s and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)
	CTORS (Street address only - P.O. Box NOT acceptable)
Chairman:	MADUM MORDIS
Address:	22 Riverview DR, Wayne NJ 07470
Vice Chair	man: Phillip Spies
Address:	5 Argyle Court
	Livingston NJ 07039
Director:	Robert Murphy
	654-Ellington Court
	Ridgewood NU 07450
Diractor	
Address: _	
B. OFFI	CERS (Street address only - P.O. Box NOT acceptable)
President:	MARUN MORRIS
	25 RIVERVIEW DR
	WAYNE NJ 07470
Vice Preci	dent: ROBERT-MURHY
	53 RIVERULEW Dn.
Address.	WAYNE, NJ 07470
	001301102, 100 00010
•	
Address: .	· · · · · · · · · · · · · · · · · · ·
•	
Treasurer:	
Address:	
NOTE: [If necessary, you may attach an addendum to the application listing additional officers and or directors.
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
í	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) MAKUID A MOVALS
14.	(Typed or printed name and capacity of person signing application)





STATE OF NEW JERSEY
DEPARTMENT OF STATE
SHORT FORM STANDING

IPP, INC.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 25th day of June, 1998

Home K Hooks

LONNA R HOOKS Secretary of State