Qualification/Tax Lien Section To: Division of Corporations COMMUNICATIONS INC. MAX (Name of corporation - must include suffix) Dear Sir or Madam: The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida. Please return all correspondence concerning this matter to the following: 200002883882 VANESSA WhitE (Name of Person) COMMUNICATIONS FNC (Firm/Company) FEDERAL Highway BEACH FL (City/State/Zip) Should you need to call someone concerning this matter, please call: at (_ VANESSA (Area Code & Daytime Telephone Number) (Name of Person) **MAILING ADDRESS:** STREET ADDRESS: Qualification/Tax Lien Section Qualification/Tax Lien Section **Division of Corporations** Division of Corporations P.O. Box 6327 409 E. Gaines St. Tallahassee, FL 32314 Tallahassee, FL 32399 Enclosed is a check for the following amount: ☐ \$87.50 Filing Fee, ☐ \$78.75 Filing Fee & \$78.75 Filing Fee & □ \$70.00 Filing Fee Certificate of Status & Certified Copy Certificate of Status Certified Copy

FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 25, 1999

VANESSA WHITE MAX COMMUNICATIONS INC. 1730 S. FEDERAL HIGHWAY, SUITE 287 DELRAY BEACH, FL 33483

SUBJECT: MAX COMMUNICATIONS INC.

Ref. Number: W99000012143

We have received your document for MAX COMMUNICATIONS INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. 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 DOCUMENT SPECIALIST indicated.

If you have any questions concerning the filing of your document, please call (850) 487-6020.

Tammi Cline Document Specialist

Letter Number: 299A00028733

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

			-,			
I, the undersigned	VANESSA	White (Name)	<u>. </u>	, do hereby	certify	_
that this Resolution of t	he Board of Directo	ors of <u>MAY</u>	Commun	ications,	INC	÷
		(Corporate Name)				
a corporation duly orga	nized and existing i	ınder the laws of tl	ne State of	DELAWARE	,	·
was duly adopted on	· 0	6/02		, 19_	<u>99</u> .	·
Be it resolved, that	MAX COMM	Molecularian (Corpo	S INC. rate Name)			
organized and existing	in the State of	DELAWAR	£,	hereby adopts the	name	
MAX Com	munication	SERVICE:	S, THC.	for use in F	lorida.	6 ii
Dated: 06/02	199	-			J 66	SEC
	1 Vanussa	White	man or any officer		UN t	FILL RETARY ON OF CO
	Signature of either	Chairman, Vice Chair	man or any officer		PM I: 0	U OF STA RPORAT
· , -	VANESS	NA White	<u> </u>	<u> </u>	<u> </u>	SHOL

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.	MAX communications INC.
	(Name of corporation; must include the word "INCORPORATED", "COMPANY", "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 possed of parameterising it not so contained in the name at present.)
2.	STATE OF DE AWARE State or country under the law of which it is incorporated) 3. 65-091143 (FEI number, if applicable)
4.	(Date of incorporation) 5. PERDET UA (Duration: Year corp. will cease to exist or "perpetual")
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6.	04/16/99
	(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7	1730 S. FEDERAL HighWAY SUITE # 287 DELRAY BEACH, FL 33483 (Current mailing address)
_	DELRAU BEACH FL 33483
	(Current mailing address)
8	TElecom United to or 45 (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. I	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
	Name: Robert Monaco
Off	ice Address: 5013 Mallards Place
	ice Address: 50/3 MATIAROS PIACE COCONVT CKEEK FL , Florida, 33073 (Zip code)
	(Zip code)
10.	Registered agent's acceptance:
in th com	ing been named as registered agent and to accept service of process for the above stated corporation at the place designated its application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to ply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent.
	(aprix -
	(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.

hairman:	VANESSA WhitE		
ddress: _	1730 S. FEDERAL HWY SUITE # 287		
_	DEIRAY BEACH, FL 33483		
ce Chairr	nan;		
idress: _			
_			
rector: _			
ldress: _			
_			
rector: _			
ldress: _			
OFFIC	EERS (Street address only - P.O. Box NOT acceptable)		<u>.</u>
	VANESSA White		
	1730 S. FEDERAL HWY SUITE #287		
	DELRAY BEACH, FL 33483	ور	DIV.
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ldress:	necessary, you may attach an addendum to the application listing additional officers and/or directors.		. <u>-</u>
ddress: — OTE: If	necessary, you may attach an addendum to the application listing additional officers and/or directors.		
ddress: _	necessary, you may attach an addendum to the application listing additional officers and/or directors.		

State of Delaware

Office of the Secretary of State PAGE

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "MAX COMMUNICATIONS, 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 SIXTH DAY OF MAY, A.D.
1999.

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

Edward J. Freel, Secretary of State

DATE:

AUTHENTICATION:

9728809