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**180.00

SECRETARY OF STATE OF STATE OF COMPONATIONS

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: AFFECTIVEX LLC Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the following:
theresa Carter
Name of Person
AFFECTIVEX, UC
Firm/Company
216 Pheasant Run Court Address
Address
City/State and Zip Code 3279
City/State and Zip Code
tcarter@az-tz.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
theresa Carter at (407) 733-7478
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount: \$\int \\$125.00 \text{ Filing Fee} \\ \text{Certificate of Status} \\ \text{Certified Copy} \\ \text{S160.00 \text{ Filing Fee, Certificate of Status}} \\ \text{Certified Copy} \\ \text{S160.00 \text{ Filing Fee, Certificate of Status}} \\ \text{Certified Copy} \\ \text{S160.00 \text{ Filing Fee, Certificate of Status}} \\ \text{Certified Copy} \\ \text{S160.00 \text{ Filing Fee, Certificate of Status}} \\ \text{Certified Copy} \\ \text{S160.00 \text{ Filing Fee, Certificate of Status}} \\ \text{Certified Copy} \\ \text{S160.00 \text{ Filing Fee, Certificate of Status}} \\ \text{Certified Copy} \\ \text{Certified Copy} \\ \text{Certified Copy} \\ \text{S160.00 \text{ Filing Fee, Certificate of Status}} \\ \text{Certified Copy} \\ Cert



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 1, 2011

THERESA CARTER 216 PHEASANT RUN COURT LONGWOOD, FL 32779

SUBJECT: AFFECTIVEX, LLC Ref. Number: W11000029943

We have received your document for AFFECTIVEX, LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, 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.

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) 245-6067.

Neysa Culligan Regulatory Specialist II

Letter Number: 911A00013399

Crystal 407-719-4168

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. AFFECTIVEX LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. DELEWALE (Jurisdiction under the law of which foreign limited liability company is organized) 3. 27-4578983 (FEI number, if applicable)
4. December 2010 (Date of Organization) 5. Peroetual (Duration: Year limited liability company will cease to exist or "perpetual")
6(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 216 Pheasant Run Cowel " 82
Longussod, Ruhoa 32779 (Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows: Elizabeth Qucken begge thereof P. Carter
P.O. Box 216 Pheasant Pur Court
Montverde, FL Longwood FL 3279
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: * marketing technology Sales, Computer Software development
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)
Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:	
AFFECTIVEX LLC	_
If unavailable, the alternate to be used in the state of Florida is:	-
2. The name and the Florida street address of the registered agent and office are:	
theresa Carter (Name)	DIVISIO
Florida Street Address (P.O. Box NOT ACCEPTABLE)	ETAR CONF
Langue od FL 32779 City/State/Zip	S. S. S.

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "AFFECTIVEX LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING

AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE

SHOW, AS OF THE SEVENTEENTH DAY OF MAY, A.D. 2011.

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

4906805 8300

110560433

Jeffrey W. Bullock, Secretary of State

AUTHENTICATION: 8766421

DATE: 05-17-11

You may verify this certificate online at corp.delaware.gov/authver.shtml