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Florida Department of State
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To:
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Fax Number : (850)617-6381

From:
Account Name : CORPDIRECT AGENTS, INC.
Account Number : 110450000714
Phone : (850)222-1173
Fax Number : (850)224-1640

PLEASE GIVE ORIGINAL SUBMISSION DATE AS FILE DATE 2/16/12

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FLORIDA PROFIT/NON PROFIT CORPORATION
ZEBRAPLACE INC.

Certificate of Status	0
Certified Copy	1
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

PLEASE GIVE ORIGINAL SUBMISSION DATE AS FILE DATE
2/16/12

February 17, 2012

CORPDIRECT AGENTS, INC.

,

SUBJECT: ZEBRAPLACE INC.
REF: W12000009552

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

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Pamela Smith
Regulatory Specialist II

FAX Aud. #: H12000042755
Letter Number: 412A00007338

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME
The name of the corporation shall be: zebraplace Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
2879 Banyan Blvd., Circle NW
Boca Raton, Fl 33431

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
Assist members with finding discounted products to purchase on-line.

ARTICLE IV SHARES
The number of shares of stock is: 10,000 authorized

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Joakim Richter, Pres/Treas/Dir
Address: 2879 Banyan Blvd., Circle N.W.
Boca Raton, Fl 33431

Name and Title: Annette Gustafsson Guenther, Sec
Address: 200 E. 5th Avenue, Suite 124
Naperville, IL 60563

Name and Title: Katarina Richter, Director
Address: 2879 Banyan Blvd., Circle N.W.
Boca Raton, Fl 33431

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Name: Joakim Richter
Address: 2879 Banyan Blvd., Circle N.W.
Boca Raton, Fl 33431

ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:
Name: Annette Gustafsson Guenther
Address: 200 E. 5th Ave., Suite 124
Naperville, IL 60563

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TALLAHASSEE, FLORIDA

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Joakim Richter — Required Signature/Registered Agent — 2-16-12 — Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

Required Signature/Incorporator — 2/16/2012 — Date