

F000000001688

TRANSMITTAL LETTER

To: Registration Section
Division of Corporations

SUBJECT: HSP Verified, Inc.
(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:

Dawn Dovel
(Name of Person)

HSP Verified, Inc.
(Firm/Company)

1120 G. Street, NW Ste 330
(Address)

Washington, DC 20005
(City/State/Zip)

200003184072--9
-03/24/00--01128--009
*****70.00 *****70.00

Should you need to call someone concerning this matter, please call:

Dawn Dovel at (202) 783-7663
(Name of Person) (Area Code & Daytime Telephone Number)

FILED
00 MAR 24 AM 10:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
WR 3/28

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

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. HSP Verified, 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. Delaware 3. 521985059
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. may 1996 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. a. 1120 G. Street NW Ste 330 Washington DC 20005
(Principal office address)
b. same
(Current mailing address)
8. Credential Verification
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)
Name: CT Corporation System
Office Address: 1311 Executive Center Drive, Suite 200
Plantation, Florida 32301
(Zip code)

FILED
00 MAR 24 AM 10:11
SECRETARY OF STATE
TALLAHASSEE FLORIDA

10. 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.

[Signature]
(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.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Judy E Hall, PhD

Address: 1120 G Street, NW Ste 330
Washington, DC 20005

Director: Norman Penner, PhD

Vice Chairman: Norman Penner, PhD
Address: 1120 G Street, NW Ste 330
Washington, DC 20005

Director: George Stricker, PhD

Address: 1120 G Street, NW Ste 330
Washington, DC 20005

Director: Kathie Larsen, PhD

Address: 1120 G Street, NW Ste 330
Washington, DC 20005

B. OFFICERS

President: Judy E. Hall, PhD

Address: 1120 G Street, NW Ste 330
Washington DC 20005

Vice President: _____

Address: _____

Secretary: Dawn Dovel

Address: 1120 G Street, NW Ste 330
Washington, DC 20005

Treasurer: _____

Address: _____

FILED
00 MAR 24 AM 10:11
SECRETARY OF STATE
TALLAHASSEE FLORIDA

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Dawn Dovel

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Dawn M. Dovel / Secretary / Treasurer

(Typed or printed name and capacity of person signing application)

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HSP VERIFIED, 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 TWENTIETH DAY OF MARCH, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

FILED
00 MAR 24 AM 10:11
SECRETARY OF STATE
TALLAHASSEE FLORIDA



Handwritten signature of Edward J. Freel

Edward J. Freel, Secretary of State

2613643 8300

001139381

0325433

AUTHENTICATION:

03-20-00

DATE: