

CT CORPORATION

F02000002013

CORPORATION(S) NAME

Killam Management and Operational Services, Inc.

02 APR 23 PM 1:22
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-84/23/02 819/1-032
*****78.75 *****78.75

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|--|---|---|
| <input checked="" type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | | |
| <input checked="" type="checkbox"/> Foreign | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| | <input type="checkbox"/> Reinstatement | |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> LLC | <input type="checkbox"/> Name Registration | <input type="checkbox"/> Change of RA |
| | <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> UCC |
| <input checked="" type="checkbox"/> Certified Copy | <input type="checkbox"/> Photocopies | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

Name _____ 4/23/02 Order#: 5292015
 Availability _____
 Document _____
 Examiner _____ Ref#: _____ kf
 Updater _____
 Verifier _____
 W.P. Verifier _____ Amount: \$ _____

BK

02 APR 23 PM 11:20

RECEIVED

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

02 APR 23 1:22 PM '92
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SECRETARY OF STATE

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. Killam Management and Operational Services, 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. New Jersey 3. 22-3098501
(State or country under the law of which it is incorporated) (FBI number, if applicable)

4. December, 1990 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. 27 Bleeker Street, Millburn, New Jersey 07041
(Principal office address)

27 Bleeker Street, Millburn, New Jersey 07041
(Current mailing address)

8. Facility operation and maintenance.
(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: CI Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (Zip code)

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.

Jennifer Leigh Morgan, Asst. Secy
(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

Please see attached

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

Please see attached

President: _____

Address: _____

Vice President: _____

Address: _____

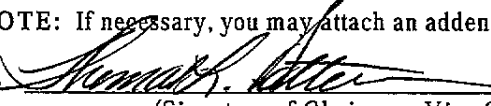
Secretary: _____

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)

14. Thomas L. Patterson, President _____
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE FLORIDA

KILLAM MANAGEMENT & OPERATIONAL SERVICES, INC.

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DIRECTORS

NAME	ADDRESS
Peter J. Wickens	27 Bleeker Street, Millburn, NJ 07041
Emil C. Herkert, P.E	27 Bleeker Street, Millburn, NJ 07041
Michael O. Blackburn	St. Anne House, Wellesley Road, Croyden CR92UL, UK
Robin B. Fox	St. Anne House, Wellesley Road, Croyden CR92UL, UK
Timothy J. Thirwall	St. Anne House, Wellesley Road, Croyden CR92UL, UK
Thomas L. Patterson	27 Bleeker Street, Millburn, NJ 07041

OFFICERS

NAME	TITLE	ADDRESS
President	Thomas L. Patterson	27 Bleeker Street Millburn, NJ 07041
Secretary	Peter J. Wickens	St. Anne House, Wellesley Road Croyden CR92UL, UK
Treasurer	Robin B. Fox	St. Anne House, Wellesley Road Croyden CR92UL, UK

cb0111601

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

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1993
PW 1
OFFICE OF STATE
TREASURER, FLORIDA

KILLAM MANAGEMENT AND OPERATIONAL SERVICES, INC.

*I, the Treasurer of the State of New Jersey,
do hereby certify that the above-named
New Jersey Domestic Profit Corporation was
registered by this office on December 31, 1990.*

*As of the date of this certificate, said business
continues as an active business in the State of New
Jersey. Annual Reports are outstanding for the
following year(s):*

1999

*I further certify that the registered agent and
registered office are:*

*Corporation Trust Company
820 Bear Tavern Road
Trenton, NJ 08628*

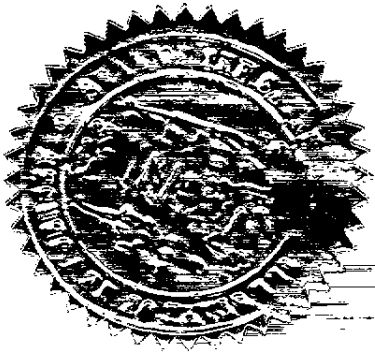
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STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

KILLAM MANAGEMENT AND OPERATIONAL SERVICES, INC.

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02 APR 23 PM 1:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

IN TESTIMONY WHEREOF, I have
hereunto set my hand and
affixed my Official Seal
at Trenton, this
22nd day of April, 2002



A handwritten signature in cursive script, reading "John E. McCormac".

John E McCormac, CPA
State Treasurer