

F03 0000004852

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

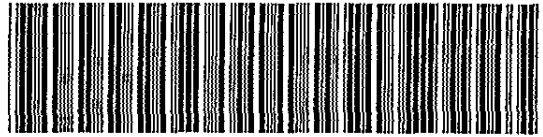
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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1010 GRAND BOULEVARD, 5TH FLOOR  
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KANSAS CITY, MISSOURI 64106-0607  
TELEPHONE (816) 474-6550 ■ FACSIMILE (816) 842-3190

ORANGE COUNTY  
OVERLAND PARK  
SAN FRANCISCO  
TAMPA  
WASHINGTON, D.C.

Daniel K. Richardson  
816.329.6136  
drichardson@shb.com

September 24, 2003

Registration Section  
Division of Corporations  
P.O. Box 6237  
Tallahassee, FL 32314

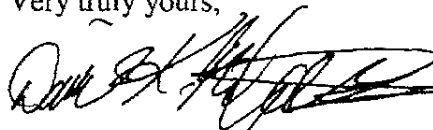
Re: **Syfact, Inc.**

To Whom It May Concern:

— Please find enclosed the Application by Foreign Corporation for Authorization to Transact Business in Florida for Syfact, Inc., the supporting documents and fee. Please return a stamp-filed copy and a receipt to the address above in the enclosed Federal Express envelope.

If you have any questions regarding these documents, please call me at the number above.

Very truly yours,



Daniel K. Richardson

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TALLAHASSEE, FLORIDA

DKR/sll  
Enclosure

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Syfact, 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:

John M. Grimbergen  
(Name of Person)  
Syfact, Inc.  
(Firm/Company)  
8 Smoke Hill Drive  
(Address)  
Stamford, CT 06903  
(City/State and Zip code)

For further information concerning this matter, please call:

Daniel K. Richardson at ( 816 ) 474-6550  
(Name of Person) (Area Code & Daytime Telephone Number)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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. Syfact, 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

(State or country under the law of which it is incorporated)

3. 56-2333049

(FEI number, if applicable)

4. December 24, 2002

(Date of incorporation)

5. Perpetual

(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. 8 Smoke Hill Drive, Stamford, CT 06903

(Principal office address)

8 Smoke Hill Drive, Stamford, CT 06903

(Current mailing address)

8. Sale of Software Products

(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: 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.

[See Attached]

(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.

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STATE  
TALLAHASSEE  
FLORIDA

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

A. DIRECTORS

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: John M. Grimbergen

Address: 8 Smoke Hill Drive

Stamford, CT 06903

Director: Gerardus H. Willemse

Address: Maraton 5

1213 PC Hilversum, The Netherlands

B. OFFICERS

President: Gerardus H. Willemse

Address: Maraton 5

1213 PC Hilversum, The Netherlands

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: John M. Grimbergen

Address: 8 Smoke Hill Drive

Treasurer: Stamford, CT 06903

Address: \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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. John M. GRIMBERGEN, SECRETARY

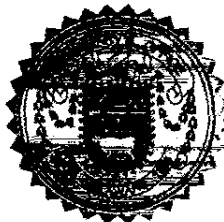
(Typed or printed name and capacity of person signing application)

# Delaware

PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SYFACT, 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 TWELFTH DAY OF SEPTEMBER, A.D. 2003.



*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 2631356

3607320 8300

030570240

DATE: 09-12-03

ACCEPTANCE OF APPOINTMENT

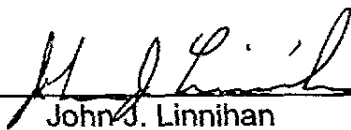
RE: SYFACT, INC.

Pursuant to Sections 48.091 and 607.0501, Florida Statutes, the undersigned acknowledges and accepts its appointment as registered agent of the above corporation and agrees to act in the capacity and to comply with the provisions of the Florida Business Corporation Act (1990) relative to keeping open the registered office at the address specified above. The undersigned is familiar with, and accepts the obligations of, Section 607.0505, Florida Statutes.

Dated: September 23, 2003

C T CORPORATION SYSTEM

By



John J. Linnihan  
Assistant Vice President

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STATE OF FLORIDA  
TALLAHASSEE

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