F05000001366

MAR-04-[illegible] CORP[illegible] P.02

MODE = MEMORY [illegible] START=MAR-02 09:48 END [illegible]02 09:50

FILE NO. 253

STN NO.	COMM.	ABBR NO.	STATION NAME/TEL NO.	PAGES	DURATION
001	OK	#	2058383	006/006	00:01:27

-CT CORPORATION

FPC

3/2

Florida Department of State

MJH

Division of Corporations

Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000052012 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)205-0383

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
Fax Number : (850)222-8428

05 MAR -4 AM 10:23

13:41 FAX 2-[illegible]

FOREIGN PROFIT QUALIFICATION

IBM Products United States, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	$70.00

Electronic Filing Menu Corporate Filing Public Access Help

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. IBM Products United States, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

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

3. 52-2449153 (FEI number, if applicable)

4. 01/18/2005 (Date of incorporation)

5. Perpetual (Duration: Your corp. will cease to exist on "perpetual")

6. 01/20/2005
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. New Orchard Road, Armonk, NY 10504
(Principal office address)

same
(Current mailing address)

8. Computer sales
(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 NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation (City), Florida 33324 (Zip code)

05 MAR -2 PM 12:21

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.

C T Corporation System

By: (Registered agent's signature) Michael J. Mitchell Assistant Secretary

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 *SEE ATTACHMENT*

Chairman: _____

Address: _____

_____

Vice Chairman: _____

Address: _____

_____

Director: _____

Address: _____

_____

Director: _____

Address: _____

_____

B. OFFICERS *SEE ATTACHMENT*

President: Simon J. Beaumont

Address: New Orchard Road

Armonk, NY 10504

Vice President: Andrew Bonzani

Address: New Orchard Road

Armonk, NY 10504

Secretary: Andrew Bonzani

Address: New Orchard Road Armonk, NY 10504

Treasurer: Richard J. Obetz

Address: New Orchard Road Armonk, NY 10504

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

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. Andrew Bonzani, Secretary

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

Attachment to Florida

Officers & Directors

1.	**Full Name:**	**Simon J. Beaumont**
	Officer/Director:	**Officer,Director**
	Officer's Title:	**Chairman and President**
	Business Address:	**New Orchard Road**
	City:	**Armonk**
	State:	**NY**
	ZIP Code:	**10504**
2.	**Full Name:**	**Andrew Bonzani**
	Officer/Director:	**Officer,Director**
	Officer's Title:	**Vice President and Secretary**
	Business Address:	**New Orchard Road**
	City:	**Armonk**
	State:	**NY**
	ZIP Code:	**10504**
3.	**Full Name:**	**Richard J. Obetz**
	Officer/Director:	**Officer,Director**
	Officer's Title:	**Vice President and Treasurer**
	Business Address:	**New Orchard Road**
	City:	**Armonk**
	State:	**NY**
	ZIP Code:	**10504**

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "IBM PRODUCTS UNITED STATES, 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 TWENTY-FIFTH DAY OF FEBRUARY, A.D. 2005.

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

3912990 8300

050161422

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3706251

DATE: 02-25-05