

F 06000000 4884

Florida Department of State  
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.

((H06000186045 3)))



H060001860453ABC/

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) 205-0381

\* File Third \*

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

001141.55142.3

FOREIGN PROFIT/NONPROFIT CORPORATION

FIFTH GENERATION SYSTEMS, INC.

RECEIVED

06 JUL 21 AM 8:00

DIVISION OF CORPORATIONS

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$87.50

06 JUL 21 PM 12:55

LEGISLATIVE DIVISION OF CORPORATIONS

Electronic Filing Menu

Corporate Filing Menu

Help

H06000186045 3

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED  
TO REGISTER A FOREIGN CORPORATION TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA.*

1. Fifth Generation Systems, 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 3. 20-5225272  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. July 17, 2006 5. Perpetual  
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 600 North Pine Island Road, Suite 350, Plantation, FL 33324  
(Principal office address)
- \_\_\_\_\_ (same as above)  
(Current mailing address)
8. technology development and general business purposes  
(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: CorpDirect Agents, Inc.  
Office Address: 515 East Park Avenue  
Tallahassee, Florida 32301  
(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.*

\_\_\_\_\_  
(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:

MIA:327862:1

H06000186045 3

06 JUL 21 PM 12:55

FL-10  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

H06000186045 3

A. DIRECTORS

Chairman: Steven M. Repetti

Address: 600 North Pine Island Road, Suite 350

Plantation, FL 33324

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

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

Director: \_\_\_\_\_

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

Director: \_\_\_\_\_

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

B. OFFICERS

President: Steven M. Repetti

Address: 600 North Pine Island Road, Suite 350

Plantation, FL 33324

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

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

Secretary: Angela Repetti

Address: 600 North Pine Island Road, Suite 350

Treasurer: Plantation, FL 33324

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

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

13. [Signature]  
(Signature of Director or Officer listed in number 12 of the application)

14. Steven M. Repetti  
(Typed or printed name and capacity of person signing application)

MAA:527862-1

06 JUL 21 PM 12:55

RECEIVED  
DIVISION OF REVENUE

H06000186045 3

PAGE 1

# Delaware

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FIFTH GENERATION SYSTEMS, 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 EIGHTEENTH DAY OF JULY, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FIFTH GENERATION SYSTEMS, INC." WAS INCORPORATED ON THE SEVENTEENTH DAY OF JULY, A.D. 2006.

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

06 JUL 21 PM12:56

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

4191438 8300

060675447



*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4906366

DATE: 07-18-06  
H06000186045 3