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1201 HAYS STREET
TALLAHASSEE, FL 323
(904) 222-9171
(904) 222-9171 FAX

800-342-8085

ACCOUNT NO. : 072100000032

REFERENCE : 888961 4378432

AUTHORIZATION : *Patricia Puyet*

COST LIMIT : \$ 70.00

ORDER DATE : March 20, 1996

ORDER TIME : 11:32 AM

ORDER NO. : 888961

900001761839

CUSTOMER NO: 4378432

W96-6761

CUSTOMER: Ms. Barbara K. Herbert
At&t Corp.
131 Morristown Rd.

Basking Ridge, NJ 07920

FOREIGN FILINGS

NAME: ATOR CORP.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: CLINT FUHRMAN

FILED
96 MAR 28 PM 1:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
96 MAR 28 PM 12:11
DIVISION OF CORPORATION



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

resubmit
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96 APR -1 PM 1:08
DIVISION OF CORPORATION

March 28, 1996

CSC NETWORKS

Please make date of
submission the file
date.

SUBJECT: ATOR CORP.
Ref. Number: W96000006761

We have received your document for ATOR CORP. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please list the street address of each officer/director. If the officer/director does not have a street address, list the mailing address and write (N/A).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6097.

Michael Mays
Document Specialist

Letter Number: 196A00014312

**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. ATOR CORP.

(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 York

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

3. applied for

(FEL number, if applicable)

4. 10/19/95

(Date of Incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. upon qualification

(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))

7. 412 Mt. Kemble Avenue

Morristown, NJ 07960, Attn: Tax Dept.

(Current mailing address)

8. To manufacture integrated circuits.

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. **Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)**

Name: The Prentice-Hall Corporation System, Inc.

Office Address: 1201 Hays Street, Suite 105

Tallahassee

, Florida, 32301

(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.

The Prentice-Hall Corporation System, Inc.

By: Mary Wiener

Asst VP

(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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TALLAHASSEE, FLORIDA

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: _____ (SEE ATTACHED)

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: _____ (SEE ATTACHED)

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

14. Barbara K. Herbert, Asst. Secretary
(Typed or printed name and capacity of person signing application)

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LIST OF OFFICERS

Dennis M. Hill - President
555 Union Blvd.
Allentown, PA 18103

Matt C. Riley
555 Union Blvd.
Allentown, PA 18103

S. L. Prendergast - Treasurer
295 North Maple Avenue
Basking Ridge, NJ 07920

Peter M. Suzuki - Vice President and Secretary
131 Morristown Road
Basking Ridge, NJ 07920

Barbara K. Herbert - Assistant Secretary
131 Morristown Road
Basking Ridge, NJ 07920

Manuel Davila - Assistant Treasurer
412 Mt. Kemble Avenue
Morristown, NJ 07960

Antoinette Duah - Assistant Treasurer
412 Mt. Kemble Avenue
Morristown, NJ 07960

Jeffrey Tutnauer - Assistant Treasurer
412 Mt. Kemble Avenue
Morristown, NJ 07960

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State of New York
Department of State ss:

I hereby certify, that the certificate of incorporation of ATOR CORP. was filed on 10/19/1995, with perpetual duration, and that I have made a diligent examination of the index of corporation papers filed in this Department for a certificate, order, or record of a dissolution, and upon such examination, I find no such certificate, order or record, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

Witness my hand and the official seal
of the Department of State at the City
of Albany, this 20th day of March
one thousand nine hundred and

~~ninety-six~~

Alexander F. Treadwell

Secretary of State



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TALLAHASSEE, FLORIDA