F96000002929

TO:

Qualification/Tax Lien Section

Division of Corporations

7104011001 815842477 -06/11/96--01111--019 -4***/8,75 *****78.75

SUBJECT: ZNTELGRAPH SERVICES COMPANY
(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:

LEXEN HALLADAY
(Name of Person)
INTERGRAPH SERVELES CEMPANY
(Firm/Company)
Po Box 6724 (Address)
(Address)
HUNTSVELLE AL 35824 (City/State/Zip)
(City/State/Zip)

Should you need to call someone concerning this matter, please call:

LEIGH HALLADAY
(Name of Person)

at (205) 730 - 1626 (Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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. Tarekokaph Searees (Name of corporation: must include the word "INCORPOR abbreviations of like import in language as will clearly indic person or partnership if not so contained in the name at pres	אליינים המכל אינים איני
2. DELAWARE (State or country under the law of which it is incorporated) DECEMBER 21, 1990	3. <u>62 - 1478078</u> (FEI number, if applicable)
4, (Date of Incorporation)	S. PERPETUAL
6. UPON QUALTETCOTEON (Date first transacted business in Florida. (SEE SECTIONS)	607.1501,607.1502, AND 817.155, F.S.)
7. P.O. Box 4724	AH
	œ ass
HUNTSVILLE AL 35824 (Current mailing	ر ع الله الله الله الله الله الله الله ال
(Current mailin	g address)
9. Name and street address of Florida registered acceptable) Name: C T Corporation System	• —
Office Address: 1200 South Pine Island Road	
Plantation	, Florida , 33324
10. Registered agent's acceptance:	(Zip Code)
Having been named as registered agent and to accept corporation at the place designated in this application registered agent and agree to act in this capacity. It all statutes relative to the proper and complete perform and accept the obligations of my position as registered agent. John J. Masters. Assistant 11. Attached is a certificate of existence duly authent delivery of this application to the Department of Sofficial having custody of corporate records in the incorporated.	signature) screen agree to comply with the provisions of rmance of my duties, and I am familiar with a dage in the signature of signature in the secretary of State or other state, by the Secretary of State or other

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: Wracon E. Souron Address: ONE MANESON TAMUSTREEN POR HUNTSVELLE SL 35874 Dakectok Vice-Chairman: LARRY LASTER Address: ______ Director: PENMAN GYLLSON Address: Some Director: NEWTON Address: Same B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: DANNY C. JEFFAETS Address: Some Vice President: Address: Secretary: KEXTA FROET Address: Treasurer: KEXTH FLOST Address: _ Same NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) (Typed or printed name and capacity of person signing application)

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INTERGRAPH SERVICES COMPANY" 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 TENTH DAY OF MAY, A.D. 1996.

AUTHENTICATION: 7940778

2250278 8300

960131460

DATE: 05-10-96



ACCOUNT NO.

072100000032

REFERENCE

329483

7105699

AUTHORIZATION

Patricia Pyrito

COST LIMIT

\$ 35.00

ORDER DATE: April 14, 1997

charge

8000002143569-- 2

ORDER TIME :

9:28 AM

ORDER NO. : 329483-005

CUSTOMER NO:

7105699

CUSTOMER:

Ms. Patti Potts

Intergraph Corporation

Mail Stop Hq034

Huntsville, AL 35894-0001

CHANGE OF AGENT

NAME:

INTERGRAPH SERVICES COMPANY

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CONTACT PERSON:

GIVISION OF CORPORATION 97 APR 15 AH 10: 139

Florida Department of State, Sandra B. Mortham, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the the undersig submits the i both, in the St	provisions of sections 607.0502, the provisions of section organized to line of the section of t	or 7,0502, 607, 7505, or 6 index the laws of the change its registered office	State of helawa ee or registered ag	ont, or
1a. The name	of the corporation is:	APR SERVICES COMPANY		
1b. The mailin	g address of the corporation is :	P.Q. Box 6726, Huntavi	11n, At. 15824	
1c. Date of in	corporation: June 12, 1996	Document number:	F96000002929	
2. The name	and address of the current regis	tered agent and office:	45	3
	C T Corporation System		AEG =	Á
	1200 South Pine Island Road		三	§ T
	Plantation, Florida, 33324		25 E	i E
3. The name a	and address of the new registered Corporation Service Compan	agent and office:(P.O. Box	(LANK WARACHERINE)	교 (D 왕 -
	1201 Hays Street		1	7
	Tallahassee, Florida 3230	1		
registered age	dress of its registered office and nt, as changed, will be identical.			
Such change	was authorized by resolution duly by the board.	adopted by its board of o	directors or by an	officer
(0/		3-27-97	_
(Signature	of an officer, chairman or nairman of the board)		(Date)	
Larry J. Las	ter, Vice President			
(Printed o	or typed name and title)			
Having been a corporation, I I further agred performance registered age	named as registered agent and a herebyaccept the appointmental e to comply with the provisions of my duties, and I am familiar ent.	to accept service of process registered agentand agress of all statutes relative to the obligation of the obligation and accept the obligations.	ess for the above ee to actin this ca the proper and col gation of my posit	stated pacity. mplete tion as
Corporati	on Service Company	4_11_9-	ר	
By: \\OL_INE	e of Registered Agent)	7-14-1	(Date)	_
,	ehalf of an entity:			
^	_ Searcy	asst. U	ice Pres.	

(Typed or Printed Name)

(Capacity)