

1201 HAYS STREET
TALLAHASSEE, FL 32301

800-342-8086

F95000003505

QSC networks
PRESTICE HALL
LEGAL & FINANCIAL SERVICES

95 JUL 20 11:23
DIVISION OF CORPORATION

ACCOUNT NO. : 072100000032

REFERENCE : 645084 97720A

AUTHORIZATION :

COST LIMIT : 0 PPD

ORDER DATE : July 20, 1995

ORDER TIME : 10:0 AM

ORDER NO. : 645084

CUSTOMER NO: 97720A

CUSTOMER: Ms. Susan S. Patton
Fieldstone Lester & Shear
Suite 2100
200 South Biscayne Boulevard
Miami, FL 33131

RUSH WILL WAIT

FOREIGN FILINGS

500001542295
-07/20/95--01049--005
*****78.75 *****78.75

NAME: CONCEPT MANAGEMENT INC.

 PROFIT
 NON-PROFIT

 CORPORATE
 LIMITED PARTNERSHIP

XXX QUALIFICATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
 PLAIN STAMPED COPY
XXX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sebreana Randolph

RUSH WILL WAIT

645-14631

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

95 JUL 20 PM 3:12

FILED



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

July 20, 1995

CSC NETWORKS

SUBJECT: CONCEPT MANAGEMENT INC.
Ref. Number: W95000014631

We have received your document for CONCEPT MANAGEMENT INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(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).

If more than one registered agent all must sign. If registered agent is a corporation it must be filed as such with our office.

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: 895A00034727

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. CONCEPT MANAGEMENT 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. Applied for
(FEI number, if applicable)
4. July 23, 1979
(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 617.153, F.S.)
7. PO Box 997120
MIAMI, FL 33299-7120
(Current mailing address)
8. Any lawful business
(Purposes) 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:
Name: David Shear
Office Address: 200 South Biscayne Blvd., #2100
Miami, Florida, 33131
(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.

By: [Signature]
(Registered agent's signature)
David Shear, AS agent

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:

A. DIRECTORS

Chairman: Michael Palmer

Address: N/A

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Michael Palmer

Address: N/A Same as # 7

Vice President: _____

Address: _____

Secretary: Michael Palmer

Address: N/A

Treasurer: Michael Palmer

Address: N/A

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

13.

Michael Palmer

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

14.

Michael Palmer, President

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

State of Delaware
Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CONCEPT MANAGEMENT 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-EIGHTH DAY OF JUNE, A.D. 1995.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

FILED
55 JUL 20 PM 3:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Edward J. Freel

Edward J. Freel, Secretary of State

AUTHENTICATION:

DATE:

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06-28-95