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| TO: | Qualification/Tax Lien Section Division of Corporations | Vaccinia e distribuir sur la companya di sur la com | 700001571 -08/29/9501017- *****78.75 ***** |
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| | r or Madam: | | |
| The end Florida' foreign | closed "Application by Foreign Corpo ", "Certificate of Existence", and chec corporation to transact business in Fl | oration for Authorization ok are submitted to regist orida. | to Transact Business in ter the above referenced |
| | eturn all correspondence concerning | | |
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| | | | |
| | James T. Lozoskie | | 炽 景 |
| | James T. Lozoskie (Na | ine of Person) | - 7. 55 - 7. 5 |
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| Plia | Dreamspace, Inc. (Fir | Suite 306 (Address) | 55 Control 100 Con |

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. Dreamspace, Inc. (Name of corporation; must include the word "INC abbreviations of like import in language as will eleperson or partnership if not so contained in the name of the contained in the contained | CORPORATED", "COMPANY", "CORPORATION" or words or only indicate that it is a corporation instead of a natural |
|---|---|
| 2. Mary Land (State or country under the law of which it is incorpor | , |
| 4. 8/24/88 | 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual"). |
| 6. Upon Qualification (Date first transacted business in Florida, (SEE) | |
| | wa Road, Sulte 306, Vlenna, VA 2218265 6 |
| (Curre | nt mailing address) |
| 8. Architecture (Purpose(s) of corporation authorized in home state of Florida) 9. Name and street address of Florida reginacceptable) | or country to be carried out in the state of stered agent: (P.O. Box or Mail Drop Box NOT |
| Name: Patricia E. Kahn, Esqu | uire |
| Office Address: 2675 S. Bayshore Drive | |
| Miami | , Florida , 33153 (Zip Code) |
| 10. Registered agent's acceptance: | (Zip Code) |
| registered agent and agree to act in this appreciate agent and agree to act in this capacital statutes relative to the proper and complete and accept the obligations of my position as references. | o accept service of process for the above stated plication, I hereby accept the appointment as city. I further agree to comply with the provisions of e performance of my duties, and I am familiar with egistered agent. |
| (Kegister | en vicura aignature) |

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 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: |
| Address: |
| Vice Chairman: |
| Address: |
| |
| Director: |
| Address: |
| |
| Director: |
| Address: |
| |
| B. OFFICERS (Street address only- P. O. Box NOT acceptable) |
| President: James Lozoskie |
| Address: 11630 Mediterranean Court |
| Reston, VA 22090 |
| Vice President: |
| Address: 11630 Mediterranean Court |
| Reston, VA 22090 |
| Secretary:Eugene_Lozoskie |
| Address: 8812 Wolverton Road |
| Baltimore, MD 21234 |
| Treasurer: Eugene Lozoskie |
| Address: 8812 Wolverton Road, Baltimore, ND 21234 |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. |
| 3. |
| (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) |
| 4. James Lozoskie, President (Typed or printed name and capacity of person signing application) |

STATE OF MARYLAND

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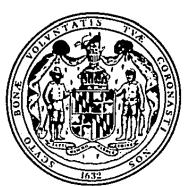
STATE DEPARTMENT OF ASSESSMENTS AND TAXATION

301 West Preston Street Bultimore, Maryland 21201

I, NANCY GRUENINGER OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT SAID DEPARTMENT, BY THE LAWS OF SAID STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATE CHARTERS, OR OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE SAND I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT DREAMSPACE, INC.

IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND SAID CORPORATION HAS FILED TALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN THE STATE OF MARYLAND.



IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE THIS 7TH DAY OF AUGUST, 1995.

NAMEY GRUENINGER ADMINISTRATIVE OFFICER

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