

Division of Corporations

Page 1 of 2

Florida Department of State

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

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.

(((H00000046540 1)))

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) 922-4003

From:

Account Name : ROGERS, TOWERS, BAILEY, ET AL
Account Number : 076666002273
Phone : (904) 398-3911
Fax Number : (904) 396-0663

Attention: Lori Hammock, Corporate Paralegal

FOREIGN PROFIT QUALIFICATION

Enable Technologies, Inc.

F-4969

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

RECEIVED
00 SEP -5 AM 9:42
TALLAHASSEE FLORIDA

FILED
00 SEP -5 PM 12:33
SECRETARY OF STATE
TALLAHASSEE FLORIDA

W/9/5-

H00000046540 1

**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.

Enable Technologies, Inc.

1. _____
(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 3. _____
(State or country under the law of which it is incorporated) (FBI number, if applicable)

4. August 16, 2000 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 08/2000
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 6850 Balfort Oaks Place
Jacksonville, FL 32216
(Current mailing address)

8. Logistics consolidation.
(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 or Mail Drop Box NOT acceptable)

Name: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida, 33324
(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.

CT Corporation System

PETER F. SOUZA
ASSISTANT SECRETARY

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

FL019 - 9/2/99 CT System Online

H00000046540 1

H00000046540 1

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

Chairman: Roger L. McClungAddress: 6850 Belfort Oaks PlaceJacksonville, FL 32216

Vice Chairman: _____

Address: _____

Director: Michael K. DiazAddress: 6850 Belfort Oaks PlaceJacksonville, FL 32216Director: Bill SchroederAddress: 6850 Belfort Oaks PlaceJacksonville, FL 32216

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

President: Roger L. McClungAddress: 6850 Belfort Oaks PlaceJacksonville, FL 32216

Vice President: _____

Address: _____

Secretary: Roger L. McClungAddress: 6850 Belfort Oaks PlaceJacksonville, FL 32216Treasurer: Michael K. DiazAddress: 6850 Belfort Oaks PlaceJacksonville, FL 32216

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

13. _____

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

14. Roger L. McClung, President

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

FILED
00 SEP - 5 PM 12:33
SEAL
TALLAHASSEE FLORIDA

H00000046540 1

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 "ENABLE TECHNOLOGIES, 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-SECOND DAY OF AUGUST, A.D. 2000.

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

FILED
00 SEP -5 PM 12:33
SECRETARY OF STATE
TALLAHASSEE FLORIDA



Edward J. Freel
Edward J. Freel, Secretary of State

3275676 8300

001424279

AUTHENTICATION: 0632188

DATE: 08-22-00

H00000046540 1