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FOREIGN PROFIT/NONPROFIT CORPORATION

Network Intelligence Corporation

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MRB 3/21

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.

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1. NETWORK INTELLIGENCE CORPORATION
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DELAWARE 3. 04 3140733
(State or country under the law of which it is incorporated) (FBI number, if applicable)

4. 1/24/02 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon Filing
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 200 Lowder Brook Dr Ste 2000 Westwood MA 02090
(Principal office address)

Same as above
(Current mailing address)

8. Software Sales
(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 NOT acceptable)

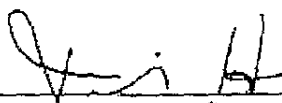
Name: CT CORPORATION SYSTEM

Office Address: 1200 SOUTH PINE ISLAND RD

PLANTATION, Florida FL 33327
(City) (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.


TRACI HOUCK
SPECIAL 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 business addresses of officers and/or directors:

A. DIRECTORS

Chairman: LYNN MORMANN.

Address: 200 LOWER BROOK DRIVE
WESTWOOD MA 02090.

Vice Chairman: _____

Address: _____

Director: MICHAEL SHANAHAN

Address: 200 LOWER BROOK DRIVE
WESTWOOD MA 02090.

Director: GEOFFREY S OBLAK

Address: 200 LOWER BROOK DRIVE
WESTWOOD MA 02090.

B. OFFICERS

President: JOHN SWEENEY.

Address: 200 LOWER BROOK DRIVE
WESTWOOD MA 02090.

Vice President: _____

Address: _____


Secretary: _____

Address: _____

Treasurer: TODD DESISTO.

Address: 200 LOWER BROOK DRIVE WESTWOOD MA 02090.

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

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. TODD DESISTO TREASURER.
(Typed or printed name and capacity of person signing application)

Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NETWORK INTELLIGENCE CORPORATION" 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 SEVENTEENTH DAY OF MARCH, A.D. 2006.

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

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

FILED
06 MAR 20 AM 11:46
TALLAHASSEE, FLORIDA



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Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4601060

DATE: 03-17-06