SUBJECT: Multisol	ft U.S. Inc	<u> </u>		-
·	(Name of corporation -	must include suffix)		
Dear Sir or Madam:				
The enclosed "Application by Foreign C and check are submitted to register the	Corporation for Authorization above referenced foreign corp	to Transact Business in F oration to transact busines	Torida", "Certificato ss in Florida.	e of Existence",
Please return all correspondence concer	ning this matter to the follow Alberto And (Name of F	mg.	0000308 -01/03/00- *****70.0	58554 -01076010 0 *****70.00
	(Name of F	erson)	· · · · · · · · · · · · · · · · · · ·	
Mu	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	,Inc.		
	•			
	O Main St., (Addre rasota, FL (City/State	Suite 101		
	(Addre	ss)		
Sa	rasota. FL	34236		
	(City/State	e/Zip)	······································	
Should you need to call someone concer		1071 1177	SECF TALL	00
(Name of Person)	CPA at 1940	J 951-1681		N T
(Name of Person)	(Area C	Code & Daytime Telephone	AHASSEE,	FILED
STREET ADDRESS:		MAILING ADDRESS:	ELSTA VIS:	M 12: 5
Qualification/Tax Lien Section Division of Corporations		Qualification/Tax Lien S Division of Corporation		<u>ज</u>
409 E. Gaines St.		P.O. Box 6327	_	unt
Tallahassee, FL 32399		Tallahassee, FL 32314		unta 1/6
Enclosed is a check for the following an	nount:			1/6
		Filing Fee &	\$87.50 Filing Fee, Certificate of Statu Certified Copy	is &

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.

- 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)

	Alberto Andrade		
	1670 Mais Street #101		•
	Sarasota FL 34236		
	ian;		
Address: _		, , , , , , , , , , , , , , , , , , ,	
Director: _	<u> </u>		
Address:			
_			
Director: _			
Address: _		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
_		· · · · · · · · · · · · · · · · · · ·	
	ERS (Street address only - P.O. Box NOT acceptable)		
	Alberto Andrade	⊣. , o	
Address: _	1670 Mais Street # 101	<u> </u>	A -
_	Sarasota FL 34236	AHAS	
Vice Preside	nt:	<u> </u>	
Address: _		FS17	
		ATE 5	
Secretary: _			-
Address: _			
•			
Treasurer: _	Alberto Androde		<i>-</i>
Address: _	• • • • • • • • • • • • • • • • • • • •		
_	Sarasota FL 34236	· · · · · · · · · · · · · · · · · · ·	
NOTE: If no	ecessary, you may attach an addendum to the application listing additional offic	ers and/or directors.	
13	(Signature of Chairman, Vice Chairman, or any officer listed in number	r 12 of the amplication)	-
14	Alberto Andrade President (Typed or printed name and capacity of person signing approximately appro		



Department of The Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

MULTISOFT U.S., INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 18th day of June, 1999, with its period of duration being PERPETUAL.

I FURTHER certify that the said corporation's articles of incorporations are not suspended for failure to comply with the Revenue Act of the State of North Catolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its recent annual report required by G.S. 55-16-2 2 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 21st day of December, 1999.

Elaine J. Marshall

Secretary of State