# FOOODOODOOO'

To: Qualification/Tax Lien Section Division of Corporations	W99-29217	MJH
Name of	corporation - must include suffix)	Ellen Marie Branch Control of Con
Dear Sir or Madam: $00789 - 0$	00701-00459	-00047-0007/ ec submitted
The enclosed "Application by Foreign Corpo "Certificate of Existence", and check are subto transact business in Florida.	oration for Authorization to Transact	Business in Florida",
Please return all correspondence concerning  Walter L. (	this matter to the following:  ATTO N  (Name of Person)	00030727780 -12/16/9901065008 
TOTAL MANAG	GEMENT Solutions (Firm/Company)	INC.
Coral Sp	(Address) (Address) (City/State/Zip)	DIVISION OF CURPORAL DOCUMENTS OF STATE
Should you need to call someone concerning  WALTER L. CATTON at  (Name of Person)	t (954) 99-590 (Area Code & Daytime Telepho	22 DE 22
STREET ADDRESS:	MAILING ADDRESS	
Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	Qualification/Tax Lien Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	ns
Enclosed is a check for the following amou	Fee & <b>□</b> \$78.75 Filing Fee &	\$87.50 Filing Fee,
Certificate of	Status Certified Copy	Certified Copy



### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 22, 1999

WALTER L. CATTON 12555 NW 54TH COURT CORAL SPRINGS, FL 33076

SUBJECT: TOTAL MANAGEMENT SOLUTIONS, INC.

Ref. Number: W99000029217

We have received your document for TOTAL MANAGEMENT SOLUTIONS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list your Federal Employer Identification Number in the appropriate block. If applied for, enter "applied for", or if not applicable, enter "N/A".

A brief description of the entity's nature of business must be included in the document.

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

The certificate submitted was a Certified Copy Certificate, this is not acceptable.,

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 (850) 487-6967.

Michelle Hodges Document Specialist

Letter Number: 899A00059985

#### 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 TOTAL MANAGEMENT SOLLITIONS, TNC.	n jamen la senjer grade.
(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. NAMARE (State or country under the law of which it is incorporated)  (FEI number, if applicable)	
4. 12 NOVEMBER 1999  (Date of incorporation)  5. PER PET VAL  (Duration: Year corp. will cease to exist or "perpetual")	
Transco laga	
6. DECEMBER 1117 (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	The same of the property of the same of th
7. 12555 NW 54TH COURT	
CORAL SPRINGS, FLORIDA 33076	T L E.J. J. L. ET LATTIERS
(Current mailing address)	-
· MANAGEMENT Solutions SOFTWARE PENELOPEMENT,	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 or Mail Drop Box NOT acceptable)	<b>5</b>
Name: WALTER L. CATTON	N SEL
Office Address: 12555 NW 54th Court	
CORAL SPRINGS, Florida, 33076	
(Zip code)	
10. Registered agent's acceptance:	E S
Having been named as registered agent and to accept service of process for the above stated corporation at the place design this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an the obligations of my position as registered agent.	сотріу
(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

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

which it is incorporated.

A. DIRECTÒRS (Street address only - P.O. Box NOT acceptable)
Chairman: WALTER L. CATTON
Address: 12555 NW 54th COURT
CORAL SPRINGS, FC. 33076
Vice Chairman:
Address:
1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
Director:
Address:
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Director:
Address:
B. OFFICERS (Street address only - P.O. Box NOT acceptable)
President: WALTER L. CATTON
Address: 12555 NW 54th COURT
CRAL SPRINGS, FL 33076
Vice President:
Address:
THE RESERVE OF THE PROPERTY OF
Secretary: CARLA M. CATTON
DETE MIN AIGH (MIDT
COLAL SPRINGS FL, 33076
Treasurer:
Address:
The state of the s
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. Waltr J. Catton Charras
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)  14. (AlTRAN CHAIRMAN
14. WALTER L. CHTON CHAIRMAN (Typed or printed name and capacity of person signing application)

#### PAGE 1

## State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TOTAL MANAGEMENT SOLUTIONS, 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 THIRD DAY OF

JANUARY, A.D. 2000

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

Edward J. Freel, Secretary of State

0175592

AUTHENTICATION:

01-03-00

3124650 8300

001001780

DATE: