F00000000336 C T CORPORATION SYSTEM Requestor's Name 660 East Jefferson Street Address Tallahassee, FL 32301 70091091191999120012 Phone Zip State City *****78.75 *****78.75 **CORPORATION(S) NAME** -01/20/00--01040--001 **Profit** () Merger () Amendment, () NonProfit () Limited Liability Compan () Mark () Dissolution/Withdrawal Foreign (XNalitication () Other () Annual Report () Limited Partnership () Change of R.A. () Reservation () Reinstatement Fictitious Name () Limited Liability Partnership M CUS () Photo Copies () Certified Copy () After 4:30 () Call if Problem Call When Ready (-) Pick Up () Will Wait () Walk In () Mail Out Name PLEASE RETURN EXTRA COPY Availability FILE STEMPED Document Examiner LAURA EARNES Updater Verifier Acknowledgment

CR2E031 (1-89)

W.P. Verifier

TRANSMITTAL LETTER

| TRANSMITTAL LETTER |
|--|
| To: Qualification/Tax Lien Section Division of Corporations |
| SUBJECT: Project ACHTEVE Jac. (Name of corporation - must include suffix) |
| (Name of corporation - must include suffix) |
| Dear Sir or Madam: |
| The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida. |
| Please return all correspondence concerning this matter to the following: |
| Mandy Lee Bernan (Name of Person) |
| Project ACHTEUE Jac (Firm/Company) |
| (Address) |
| San Francisco, CA 94107 (City/State/Zip) |
| Should you need to call someone concerning this matter, please call: |
| (Name of Person) (Area Code & Daytime Telephone Number) |
| STREET ADDRESS: MAILING ADDRESS: |
| Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Qualification/Tax Lien Section Division of Corporations P.O. Box 6327 |
| Tallahassee, FL 32399 Tallahassee, FL 32314 |
| Enclosed is a check for the following amount: |
| \$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & Certificate of Status Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy |

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. Project ACHTE & Joseph (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. Do laward (State or country under the law of which it is incorporated) 3. applied for (FEI number, if applicable) |
| 4. March 27, 1998 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual") |
| 6. No Sale to date (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) |
| 7. 330 Townsend, Suite 217 - Dan Francisco, CA 94107 |
| (Current mailing address) |
| 8. <u>Nale and Support of ACHIEVE Management Information</u> (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 3. Blen for K-12 Schools 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) |
| Name: CT Corporation Supters Office Address: 1000 South Pre John 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. |
| (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.

| DIRECTORS (Street address only - P.O. Box NOT acceptable) | |
|---|--|
| nairman: Stocy M. Boyd | |
| | 6 33 |
| ddress: 2477 Valleys Street San Francisca, CA 94123 | 2 025 |
| ice Chairman: | - 10 M |
| ddress: | · · · · · · · · · · · · · · · · · · · |
| irector: Mihir Desoi | |
| ddress: Hawal Business School, Morgan 363 | |
| Botton, MAODICE | |
| rector: Cheden From Str. | |
| ddress: 5404 Surce, Steet Bettesda, WD 20815 OFFICERS (Street address only - P.O. Box NOT acceptable) | 21 Ab. |
| Bettesda, mb 20815 | |
| | |
| esident: Stacey M. Roy d | |
| Idress: <u>2477 Vallejo Sheet</u> | |
| dress: 2477 Vallejo Sheet San Francisco, CA 94123 | |
| ce President: | ······································ |
| ldress: | |
| | |
| cretary: Tan Char O | |
| Idress: One International Place | , |
| Boston, M. A. ODIIO | |
| easurer: Mi Lic Despie | |
| Idress: HBS, Morgan 363 | |
| Boston, MADDIGS | |
| OPE: If secessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) |) _O |
| President a CEO Stace, W. Boyd (Typed or printed name and capacity of person signing application) | |

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 "PROJECT ACHIEVE 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 SEVENTH DAY OF JANUARY, A.D. 2000.

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.

Edward J. Freel, Secretary of State

AUTHENTICATION:

0187014

DATE:

01-07-00

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