

FOO OOOO TRANSMITTAL LETTER 787

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: INCURRENT SOLUTIONS, INC.
(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:

MARK BETZ
(Name of Person)
INCURRENT SOLUTIONS, INC.
(Firm/Company)
10 LANIDEX CENTER WEST - SUITE 130
(Address)
PARSIPPANY, NJ 07054
(City/State/Zip)

FILED
00 FEB -7 AM 8:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
mtu
2/11

4000003126134--B
-02/07/00-01117-010
*****87.50 *****87.50

Should you need to call someone concerning this matter, please call:

MARK BETZ at (973) 781-9012
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & 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. INCURRENT SOLUTIONS, INC.

(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. NEW JERSEY

(State or country under the law of which it is incorporated)

3. 22-3525021

(FEI number, if applicable)

4. 07/07/97

(Date of incorporation)

5. PER

(Duration: Year corp. will cease to exist or "perpetual")

6. 10/1/99

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

7. 10 LANIDEX CENTER

PARSIPPANY NJ 07054

(Current mailing address)

8. PROVIDE SOFTWARE LICENSING, CONSULTING, MAINTENANCE & HOSTING SERVICES

(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: MARK BETZ

Office Address: 1800 PEMBROOK DRIVE

ORLANDO, FL, Florida, 32810

(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 which it is incorporated.

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

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

Chairman: CHING-I HSU

Address: 400 COTTONTAIL LANE
SOMERSET, NJ 08873

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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

President: MARK BETZ

Address: 41 JAIME COURT
MORRIS PLAINS, NJ 07950

Vice President: MICHAEL S. FOSTER

Address: 41 SHELLEY AVENUE
HARTSDALE, NY 10530

Secretary: _____

Address: _____

Treasurer: ALLEN Y. YANG

Address: 699 JOHN CHRISTIAN DRIVE
BRIDGEWATER, NJ 08807

FILED
00 FEB - 7 AM 8:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

13. X [Signature]

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

14. MARK BETZ, PRESIDENT

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

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

INCURRENT SOLUTIONS, INC.
With the Previous or Alternate Name
INCURRENT, INC.

*I, the Treasurer of the State of New Jersey,
do hereby certify that the above-named
New Jersey Domestic Profit Corporation was
registered by this office on July 7, 1997.*

*As of the date of this certificate, said business
continues as an active business in good standing
in the State of New Jersey, and its Annual Reports
are current.*

*I further certify that the registered agent and
registered office are:*

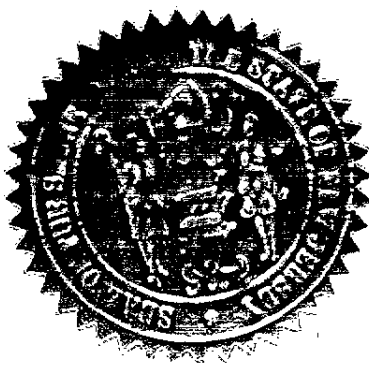
*Allen Yang
699 John Christian Dr
Bridgewater, NJ 08807*

Continued on next page . . .

00 FEB -7 AM 8:53
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

INCURRENT SOLUTIONS, INC.
With the Previous or Alternate Name
INCURRENT, INC.



IN TESTIMONY WHEREOF, I have
hereunto set my hand and
affixed my Official Seal
at Trenton, this
7th day of January, 2000

Roland M Machold

Roland M Machold
Treasurer

FILED
00 JAN -7 AM 8:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA