

CAPITAL CONNECTION, INC.

100 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302
(850) 224-8877 • 1-800-422-8063 • Fax (850) 222-1222

F00000000858

CAUV, Incorporated

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- FILED**
00 FEB 15 PM 3:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
- Art of Inc. File _____
LTD Partnership File _____
☒ Foreign Corp. File Cert _____
L.C. File _____
Fictitious Name File _____
Trade/Service Mark _____
Merger File _____
Art. of Amend. File _____
RA Resignation _____
Dissolution / Withdrawal _____
Annual Report / Reinstatement _____
☒ Cert. Copy _____
Photo Copy _____
Certificate of Good Standing _____
Certificate of Status _____
Certificate of Fictitious Name _____
Corp Record Search _____
Officer Search _____
Fictitious Search _____
Fictitious Owner Search _____
Vehicle Search _____
Driving Record _____
UCC 1 or 3 File _____
UCC 11 Search _____
UCC 11 Retrieval _____
- RECEIVED**
00 FEB 11 AM 10:33
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Signature _____

Requested by: LM 2/11 9:32

Name _____ Date _____ Time _____



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

February 11, 2000

CAPITAL CONNECTION

TALLAHASSEE, FL

SUBJECT: CAVU, INCORPORATED
Ref. Number: W00000003801

FILED
00 FEB 15 PM 3:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for CAVU, INCORPORATED and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$78.75 payment.,

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

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) 487-6914.

Buck Kohr
Corporate Specialist

Letter Number: 400A00007317

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned BRIAN ANDREW, do hereby certify
(Name)

that this Resolution of the Board of Directors of CAVU, INC

(Corporate Name)

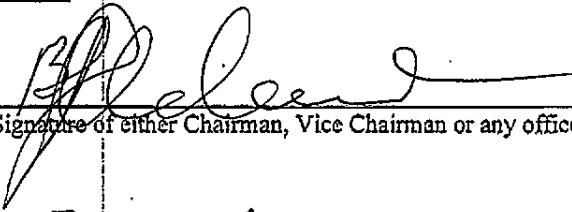
a corporation duly organized and existing under the laws of the State of GEORGIA

was duly adopted on FEBRUARY 14, 2000

Be it resolved, that CAVU, INC
(Corporate Name)

organized and existing in the State of GEORGIA, hereby adopts the name
e-xpedient, INC for use in Florida.

Dated: FEBRUARY 15, 2000


Signature of either Chairman, Vice Chairman or any officer

BRIAN ANDREW

Type or print Name

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00 FEB 15 PM 3:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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. CAVU, INCORPORATED
(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. GEORGIA 3. 58-2491140
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. SEPT 20, 1999 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. FEB 16, 2000
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 4525 VINELAND RD, SUITE 209
ORLANDO, FL 32811
(Current mailing address)

8. INTERNET SERVICE PROVIDER
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

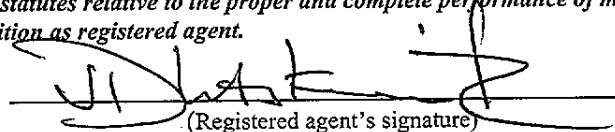
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: JOHN LASKOWITZ

Office Address: 3009-D WHISPER LAKE LANE
WINTER PARK, Florida, 32792
(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)

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00 FEB 15 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Chairman: BRIAN ANDREW

Address: 10635 EMERALD CHASE
ORLANDO, FL 32836

Vice Chairman: PATRICK LIEN

Address: 110 MOCKINGBIRD TRAIL
PEACHTREE CITY, GA 30269

Director: _____

Address: _____

Director: _____

Address: _____

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00 FEB 15 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

President: BRIAN ANDREW

Address: 10635 EMERALD CHASE
ORLANDO, FL 32836

Vice President: JO ELLEN ANDREW

Address: 10635 EMERALD CHASE
ORLANDO, FL 32836

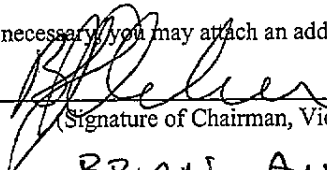
Secretary: PATRICK LIEN

Address: 110 MOCKINGBIRD TRAIL
PEACHTREE CITY, GA 30269

Treasurer: _____

Address: _____

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

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. BRIAN ANDREW - CHAIRMAN
(Typed or printed name and capacity of person signing application)

Secretary of State
Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

DOCKET NUMBER : 000340913
CONTROL NUMBER : K936719
DATE INC/AUTH/FILED: 09/08/1999
JURISDICTION : GEORGIA
PRINT DATE : 02/03/2000
FORM NUMBER : 211

JOHN LASKOWITZ
CAVU, INC.
3009-D WHISPER LAKE LANE
WINTER PARK, FL 32792

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

CAVU, INC.
A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Cathy Cox

Cathy Cox
Secretary of State