

# FO0000001385



**THE UNITED STATES  
CORPORATION  
COMPANY**

P.O. Box 5828  
Tallahassee, FL 32314  
(800) 342-8086

Account No.: 072100000032

Reference : Modis

Authorization: Patricia Pujit

Cost Limit : \$ 78.70

OFFICE USE ONLY

(Requestor's Name)

1201 Hays Street

(Address)

Tallahassee, FL 32301 222-9171

(City, State, Zip)

(Phone #)

CSC Contact: Cindy Harris

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Modis Operations of Nevada Inc.

(Corporation Name)

000003169860--8  
(Document #)

2. \_\_\_\_\_  
(Corporation Name)

(Document #)

3. \_\_\_\_\_  
(Corporation Name)

(Document #)

4. \_\_\_\_\_  
(Corporation Name)

(Document #)

☒ Walk in ☐ Pick up time

☐ Mail out ☐ Will wait

☐ Photocopy

☒ Certified

☐ Certificate

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

00 MAR 14 PM 2:29

RECEIVED

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input checked="" type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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B/C  
3/14/04

Enclose to Initials

**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.*

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1. Modis Operations of Nevada, 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. Nevada 3. Applied For  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. March 8, 2000 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. One Independent Drive, Jacksonville, Florida 32202  
(Current mailing address)

8. Any and all lawful business purposes  
(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: Corporation Service Company

Office Address: 1201 Hays Street  
Tallahassee, Florida, 32301  
(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.*

Corporation Service Company

By: \_\_\_\_\_

ALLAN COURENBY ASST VP *as its 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: See attached officers/directors rider

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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

President: See attached officers/directors rider

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

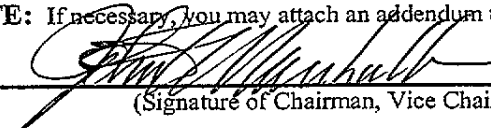
Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

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. John Marshall, Assistant Secretary  
(Typed or printed name and capacity of person signing application)

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## OFFICERS/DIRECTORS RIDER

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### OFFICERS

NAME	TITLE	ADDRESS
Derek E. Dewan	President	One Independent Drive Jacksonville, FL 32202
Michael D. Abney	Senior Vice President and Treasurer	One Independent Drive Jacksonville, FL 32202
Marc M. Mayo	Senior Vice President and, Secretary	One Independent Drive Jacksonville, FL 32202
John Marshall	Assistant Secretary	One Independent Drive Jacksonville, FL 32202
Gerald Robinson	Assistant Vice President—Taxes	One Independent Drive Jacksonville, FL 32202

### DIRECTORS

NAME	ADDRESS
Derek E. Dewan	One Independent Drive Jacksonville, Florida 32202
Michael D. Abney	One Independent Drive Jacksonville, Florida 32202
Marc M. Mayo	One Independent Drive Jacksonville, Florida 32202

JK144161

# SECRETARY OF STATE



SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **MODIS OPERATIONS OF NEVADA, INC.** as a corporation duly organized under the laws of NEVADA and existing under and by virtue of the laws of the State of Nevada since MARCH 8, 2000, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand  
and affixed the Great Seal of State, at my office, in  
Carson City, Nevada, on March 9, 2000.

*Dean Heller*

Secretary of State

By *[Signature]*  
Certification Clerk