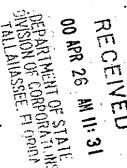
REFERENCE: (Sub Account) DATE: Lexis Document Services REQUESTOR HAME: ADDRESS: TELEPHONE: _) ext (____ CONTACT NAME: CORPORATION HAME: Florida 4C Management DOCUMENT NUMBER: (if applicable) 500003224965--3 CERTIFIED COPY (1-9) CERTIFICATE OF STATUS (1-9) PLAIN STAMPED COPY) Call When Ready Call if Problem Will Wait Walk In Pick Up) Hail Out

My Hr



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. Florida	4C Management, Inc.			9	
words or stoote	ration; must include the word "INCORPORA rations of like import in language as will clear partnership if not so contained in the name a	rly indic	ate that it is a componetion instead as a	NPR 26	
2. Delaware		3	Applied For	22	354 200,
(State or country	under the law of which it is incorporated)	٠	(FEI number, if applicable)		- 32
4. <u>April 24</u> ,	~		Perpetual	ઝ	ONS
(Date	e of incorporation) (Di	uration:	Year corp. will cease to exist or "perpetu	al")	• · · · -= - · · ·
6. Upon Fili					
(Date first	transacted business in Florida.) (SEE SECTION	ONS 60	7.1501, 607.1502 and 817.155, F.S.)		of American
725 Ford R	oad, Westport, CT 06880				
					-
	(Current mailing adds	ess)	<u> </u>	·	
(Purpose(s	action of any or all lawful pur of corporation authorized in home state or c eet address of Florida registered agent: Lexis Document Services Inc.	ountry t	o be carried out in state of Florida)		
Office Address:	3953 WW Kelley Road				· - · · ·
_	Tallahassee	 ,	Florida, 32311 (Zip code)	 -	
			(Zip code)		
10. Registered ag	gent's acceptance:				
with the provisions	as registered agent and to accept service of sreby accept the appointment as registered a of all statutes relative to the proper and comply position as registered agent. (Registered agent's significant of the proper and comply position as registered agent.)	gent and olete per QS A	l agree to act in this capacity. I further of formance of my duties, and I am familia		•

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)

hairman: See Attached		· ·
ddress:		
-		O TO THE TOTAL T
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rector:	!	~ °
idress:		
iu(ess;		
OFFICERS (Street address only	- P.O. Box NOT acceptable)	
		ı
Iuress;		
ce President:		
ldress:		
cretary:		
	•	
	•	
dress:		
dress:		
easurer:		
easurer:		officers and/or directors.
easurer: dress: OTE: If necessary, you may attach an a	nddendum to the application listing additional o	•
dress: dress: DTE: If necessary, you may attach an a		^및 :

FLORIDA 4C MANAGEMENT, INC.

Officers:

Jeffrey J. Knyal 25 Ford Road

Westport, CT 06880

Robert A. Ells 25 Ford Road

Westport, CT 06880

Walter M. Muller 25 Ford Road

Westport, CT 06880

Anthony J. LaCivita 25 Ford Road

Westport, CT 06880

David H. Mortlock 25 Ford Road

Westport, CT 06880

President

Vice President

Vice President

Secretary

Treasurer

Director:

Jeffrey J. Knyal 25 Ford Road Westport, CT 06880

State of Delaware

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Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FLORIDA 4C MANAGEMENT, INC." IN 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 TWENTY-FIFTH DAY OF APRIL, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID FLORIDA 4C MANAGEMENT, INC. WAS INCORPORATED ON THE TWENTY-FOURTH DAY OF APRIL, 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 0399472

AUTHENTICATION:

04-25-00

001208956

DATE.