

ACCOUNT NO. : 072100000032

REFERENCE :

795115

7205396

AUTHORIZATION

COST LIMIT

ORDER DATE : August 10, 2000

ORDER TIME : 4:24 PM

ORDER NO. : 795115-005

CUSTOMER NO: 7205396

CUSTOMER:

Keith A. Krauss, Esq

Tmc Services Inc. 81 Dorsa Avenue

Livingston, NJ 07039

FOREIGN FILINGS

NAME:

TMC SERVICES, INC.

XXXX QUALIFICATION

(TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight EXT: 1156



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 23, 2000

SUSIE KNIGHT CSC TALLAHSSEE, FL

SUBJECT: TMC SERVICES, INC. Ref. Number: W00000020712

RESUBMIT

Please give original aubmission date as file date.

DIVISION OF COMPORALIO: 58

We have received your document for TMC SERVICES, INC. and the authorization to debit your account in the amount of \$3537.50. However, the document has not been filed and is being retained for the following:

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.

If you have any questions concerning the filing of your document, please call (850) 487-6914.

Buck Kohr Corporate Specialist

Letter Number: 000A0004515

RECEIVED

TMC SERVICES OF FLORIDA, LLC 3290 N.W. 29th Steet Miami, Florida 33142



To: The Secretary of State of the State of Florida

From: TMC Services Of Florida, LLC

The undersigned, TMC Services of Florida, LLC, (the "LLC") which is soley owned by its member, TMC Services, Inc., a New Jersey Corporation, hereby consents on behalf of the LLC to use in the State of Florida of the name "TMC Services" by TMC Services, Inc.

TMC Services of Florida, LLC

Philip Caprio Jr., Manager

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRA **BUSINESS IN FLORIDA**

				SS IN THE STATE OF FLORIDA.	6 . 32
we	arne of corp ords or abbre	Services, Inc. oration; must include the word "IN viations of like import in language or or partnership if not so contained in	as will clearly indicate	OMPANY", "CORPORATION" or that it is a corporation instead of a	58 JONS
	·	Jersey		22-1760691	- ·
(St	ate or count	ry under the law of which it is inco	rporated)	(FEI number, if applicable)	
4	1964		5	Perpetual	
·	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")				(I")
6.	Ju1y	1, 1997			
	(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)				· ·
7	81 Da	orsa Avenue	,	,	
	Livingston, N.J. 07039				-
	(Current mailing address)				
8	Gene			· · · · · · · · · · · · · · · · · · ·	Marie and the state of the stat
	(Purpose	e(s) of corporation authorized in he	ome state or country t	o be carried out in state of Florida)	
9. N	ame and s	treet address of Florida regist	ered agent: (P.O.	Box or Mail Drop Box NOT acceptab	le)
	Name:	Corporation Service Co	mpany	and the second second	· 1 4 9 4
Offic	e Address:	1201 Hays Street		and the second second	e e e e e e e e e e e e e e e e e e e
		Tallahassoa		32301	

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.

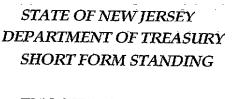
(Registered agent's signature)

Louise B. Smith, Asst. Vice-President

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 QNLY - P.O. Box NOT acceptable)

15:14 EDT



TMC SERVICES, INC.
With the Previous or Alternate Name
TRI-HEALTH SYSTEMS

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 August 13, 1964.

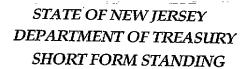
As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

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

Keith A Krauss Esq Connell Foley And Geiser 85 Livingston Ave Roseland, NJ 07068

Continued on next page . . .

00 AUG 23 AM 10: 58



TMC SERVICES, INC.
With the Previous or Alternate Name
TRI-HEALTH SYSTEMS

OO AUG 23 AMID: 58

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 11th day of August, 2000

Rdom's mimachols

Roland M Machold Treasurer