## TRANSMITTAL LETTER

| To: Qualification Division of C  | Tax Lien Section<br>Corporations  |  |   |
|--|---|--|---|
| SUBJECT: AER   | WIRE CORPORATION  |  |   |
|  | (Name of corporati  | on - must include suffix)  |   |
| Dear Sir or Madam:   |   |  |   |
| The enclosed "Application "Certificate of Existe to transact business in | eation by Foreign Corporation for<br>nce", and check are submitted to<br>n Florida. | Authorization to Transact E register the above reference                   | Business in Florida",<br>d foreign corporation            |
| Please return all corre  | espondence concerning this matte  | r to the following:5000  | 0033968459  |
|  | G.E. Marshall   |  | 09/18/0001124006<br>#****78.75 *****78.75                 |
|  | (Name o   | f Person)  |   |
|  | WILSON MARSHALL & TA  | YLOR   |   |
|  | (Firm/Co  | ompany)  |   |
|  | 2465 East Bayshore R<br>(Add  |  |   |
|  | Palo Alto, CA 94303   | -3205  |   |
| <del></del>  | (City/St  | ate/Zip)   | <del></del>   |
| Should you need to ca  | all someone concerning this matt  | er, please call:   | SE OC   |
| (Name of Pe  | rson) (Area   | Code & Daytime Telephone   | Number S  |
| STREET ADDRESS  Qualification/Tax Lie Division of Corporati              | n Section   | MAILING ADDRESS:  Qualification/Tax Lien Services Division of Corporations | FILED PIB M 8: 27 TARY OF STATE HASSEE, FLORIDA           |
| 409 E. Gaines St. Tallahassee, FL 3239                                   | 30  | P.O. Box 6327<br>Tallahassee, FL 32314                                     | 7   |
|  | or the following amount:  | Tallallassee, T.D. 52514   | ynth  |
| ☐ \$70.00 Filing Fee   | <del>-</del>  | \$ \$78.75 Filing Fee & C<br>Certified Copy                                | S87.50 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.   | AERWIRE CORPORATION   |   |                  |               |  |                        |          |  |
|--|---|---|------------------|---------------|--|------------------------|----------|--|
| (  | (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or   |   |                  |               |  |                        |          |  |
| ١.   | 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.) |   |                  |               |  |                        |          |  |
| •  | iaiurai person or   | partnership if not so contained   | in the name at   | present.)     |  |                        |          |  |
| _  | DELAWARI  | 7   |                  | _             | 50 3650006 ···   |                        |          |  |
| 2.   |   | under the law of which it is inco   | omorated)        | 3             | 59-3652836<br>(FEI number, if application)   | ohla)                  |          |  |
| ,  |   |   | прогисси         |               | •  | 1016)                  |          |  |
| 4  | 05/26/00  |   | 5                |               | etual  |                        |          |  |
| (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")                |   |   |                  |               |  |                        |          |  |
| 6  | 5. 08/15/00   |   |                  |               |  |                        |          |  |
| (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) |   |   |                  |               |  |                        |          |  |
| 7  | 1775 W.   | Hibiscus Blvd., Suit  | e 304            |               |  | <u></u>                | •        |  |
|  | Melbourn  | ne, FL 32901  |                  |               |  |                        |          |  |
| _  |   | (Current  | mailing addre    | ss)           |  |                        | ,        |  |
|  |   |   |                  |               |  |                        |          |  |
| 8  |   | ul activity   |                  |               |  | S                      |          |  |
|  | (Purpose(s  | ) of corporation authorized in he   | ome state_or co  | untry to      | e carried out in state of Florid   | ia) FC                 |          |  |
| 9. 1   | Name and stre   | et address of Florida regist  | ered agent.      | (ኮሰ ክ         | or or Mail Drop Boy NOT  | 一路 第一                  | 1        |  |
|  |   |   | orea agent.      | (1.0. b       | ox or man brop box <u>NOT</u>  |                        | <u>:</u> |  |
|  | Name: _   | Robert J. Fisher  |                  |               |  | SEE                    | 1        |  |
| O£€  | ice Address:  | 1775 W. Hibiscus E  | Tred Cost        | to 20/        | •  | OF S                   | J        |  |
| On   | ice Address.  | Z775 W. MIDISCES I  | تين و ١٠٠٠       | <u>re</u> 30. | to entre | OR A                   |          |  |
|  | -   | Melbourne   | ·                | , F           | lorida, <u>32901</u>   | [주 27                  |          |  |
|  |   |   |                  |               | (Zip code)   |                        |          |  |
| 10   | Registered as   | gent's acceptance:  |                  |               |  |                        |          |  |
| 10.  | registered ag   | sent s acceptance;  | j.               |               |  |                        |          |  |
| this<br>with   | application, I h<br>the provisions  | l as registered agent and to acc<br>ereby accept the appointment a<br>of all statutes relative to the pro | s registered ag  | ent and       | agree to act in this capacity.   | I further agree to com | ply      |  |
| the obligations of my position as registered agent.  |   |   |                  |               |  |                        |          |  |
|  |   | Gobert  | yyun             | Lu            | sur.   |                        |          |  |
|  |   | (Regis  | tered agent's si | gnature)      |  |                        |          |  |
|  |   |   |                  |               |  |                        |          |  |

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. DIRECTO     | RS (Street address only - P.O. Box NOT acceptable)                           |  |
|----------------|--|--|
| Chairman:      | Michael W. Morrissey   |  |
| Address:       | 14191 Okanogan Drive   |  |
|                | Saratoga, CA 95070   |  |
| Director       | Brian D. Brown   |  |
| Address:       |  |  |
|                |  |  |
| Director:      | Robert J. Fisher   | ······································ |
| Address:       | 212 12th Terrace   |  |
|                | Indiatlantic, FL 32903   |  |
| Director:      | George A. Adaniya  |  |
| Address:       | 120 Gallaupes Pint Road  |  |
| <u></u>        | Swampscott, MA 61907   |  |
| B. OFFICE      | RS (Street address only - P.O. Box NOT acceptable)                           |  |
| President:     | Brian D. Brown   |  |
| Address:       | 1775 W. Hibiscus Blvd, Suite 304   |  |
|                | Melbourne, FL 32901  | SE(                                    |
| Vice President | . N/A  | LARE SE T                              |
| Address:       |  | ARV -8                                 |
|                |  |  |
| Secretary:     | G.E. Marshall  | LOR 89                                 |
|                | 2465 E. Bayshore Road, Suite 402   | 27<br>DA                               |
|                | Palo Alto, CA 94303-3205   |  |
| Treasurer:     | Gerald Askew   |  |
| Address:       | 19066 Austin Way   |  |
|                | Saratoga, CA 95070   |  |
| NOTE: If no    | ecessary, you may attach an addendum to the application listing additional   | l officers and/or directors.           |
| 13             | Bria D Brown   |  |
|                | (Signature of Chairman, Vice Chairman, or any officer listed in numb         | er 12 of the application)              |
| 14             | Brian D. Brown, President (Typed or printed name and capacity of person sign | ing application)                       |

## State of Delaware Office of the Secretary of State

PAGE -

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIEY "AERWIRE CORPORATION" IS 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 AUGUST, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE:

00 SEP 18 AM 8: 27
SECRETARY OF STATE



Edward J. Freel, Secretary of State

AUTHENTICATION: 0640076

3235329 - 8300

001431710

DATE: 08-25-00