1120 G STREET, N. W. SUITE 930
WASHINGTON, D. C. 20005-3801

DANA S. GLYNN
202-628-2418
E-MAIL: DGLYNN@CMGPC. COM

FAX 202-628-3834

ATTORNEYS ADMITTED IN

October 16, 2000

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

900003434099--3 -10/20/00--01091--002 \*\*\*\*\*70.00 \*\*\*\*\*\*70.00

Re: DCMS, Inc. (d/b/a Design Change Management Systems, Inc.)

Dear Sir or Madam:

Enclosed please find the following documents:

XX Transmittal letter,

XX Application by foreign corporation for authorization to transact business in Florida

XX Resolution authorizing name change in Florida

XX Certificate of Existence

XX Check for \$70.00

Please file these documents on behalf of DCMS, Inc., a Minnesota corporation speking to do business in Florida. It has come to our attention that the name "DCMS, Inc." is a ready being used by a corporation in Florida. Therefore, Newton Long, the sole director and shareholder of DCMS, Inc. has adopted a resolution authorizing the company to operate using the name "Design Change Management Systems, Inc." in Florida. Please file these documents and send a stamped copy to me in the enclosed self-addressed, postage pre-paid enveloped.

Thank you for your assistance. If you have any questions please contact me at 202 % 5000.

Very truly yours,

10/24

Dana S. Glynn

#### DCMS, INC. (A DELAWARE CORPORATION)

## WRITTEN CONSENT OF SOLE DIRECTOR & SHAREHOLDER IN LIEU OF SPECIAL MEETING

THE UNDERSIGNED, being the sole director ("Director") and shareholder ("Shareholder") of DCMS, Inc., a Minnesota corporation (the "Corporation"), acting in accordance with Section 302A of the Minnesota Statutes, hereby waives the calling of a special meeting of the directors and shareholders, consents in writing this 13<sup>th</sup> day of October, 2000 to the adoption of the following resolutions, and directs that this written consent be filed with the minutes of the proceedings of the Corporation.

WHEREAS: The Director and Shareholder intends to register the Corporation as a foreign profit corporation to transact business in Florida.

WHEREAS: A corporation using the name "DCMS, Inc." is already in existence in Florida.

WHEREAS: The sole Director and Shareholder deems it advisable and in the best interest of the Corporation to authorize and approve the adoption of the name "Design Change Management Systems, Inc." for use in Florida.

NOW, THEREFORE, BE IT:

RESOLVED, that the Corporation is authorized to use the name "Design Change" Some Management Systems, Inc." in the state of Florida for purposes of registering as a foreign profit corporation seeking to transact business in the state.

IN WITNESS WHEREOF, the undersigned has executed this written consent as of the day and year first written above.

Newton E. Long III

## 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.	. <u>DCMS</u>	Inc.				# Tr 1		_ :	
	(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.)								
	natural person or	partnership if not so contained in the name	e at p	resent.)					
2.	Minnesota	ı <u></u>	_ 3	41	169 7851				
(State or country under the law of which it is incorporated) (FEI number						licable)		_	
4.	. <u>June 18.</u>	1991	5.	per	petual				
	(Date	of incorporation)			ar corp. will cease to	exist or "pe	petual"	)	
6.	. January 1	., 2000							
	(Date first transact	ted business in Florida. If corporation has				"upon qualif	ication.'	")	
		(SEE SECTIONS 607.1	501,	607.1502 and 8	17.155, F.S.)				
7.	10150 Hig	hland Manor Drive; Suite 2	00;	Tampa, Flo	orida 33610				
(Principal office address)								_	
same									
		(Current mailing	addr	ess)				_	
	The purpose of the corporation is to assist businesses increase productivity								
8.	by provid	ding training and general c	ons	ulting ser	vices	<u> </u>	ō		
	(Purpose(s)	of corporation authorized in home state of	or cou	intry to be carrie	d out in state of Flo	rida) 上芒	8	<del> </del>	
9.	. Name and stre	et address of Florida registered age	nt: (	P.O. Box or M	Iail Drop Box <u>NO</u>	Tacceptabl	e) 🗸	=	
					_	3EE (	0	in	
	Name: _	Newton Long				工(C	<b>P</b>	Ü	
Oi	Office Address:	10150 Highland Manor Drive	. s	uite 200		55 55 57	ب		
					-	Ĩ,	±.		
		Tampa		, Florida _	33610		ب		
		(City)			(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 business addresses of officers and/or directors:

A. DIKE		
Chairman:	Newton Long	
Address: _	10150 Highland Manor Dr., Suite 200	
_	Tampa, Florida 33610	
Vice Chair	man:	
Address: _		
_		
Director:		
Address: _		
_		
Director:		***************************************
Address: _		<del></del>
-		O O O ALLA
B. OFFI	CERS	FIL ETAS
President:	Newton Long	LEI 20 1 33Y 01 SSEE,
Address: _	10150 Highland Manor Dr.: Suite 200	FLO
_	Tampa, Florida 33610	ANDA 48
Vice Presid	dent:	
_		
Secretary:		
Address: _		
Treasurer:		
Address: _		
NOTE: I	f necessary, you may attach an addendum to the application listing additional officers	s and/or directors.
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of	the application)
14.	Newton Long, President	αιο αργασατιστή
14.	(Typed or printed name and capacity of person signing application)	

# State of Minnesota

## **SECRETARY OF STATE**

#### Certificate of Good Standing

I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

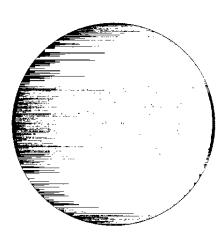
Name: DCMS, Inc.

Date Formed: 06/18/1991

Chapter Governed By: 302A

This certificate has been issued on 10/11/00.

00 OCT 20 PM 9: 48
SECRETARY OF STATE
TALL AHASSEF, FLORIDA



Mary Kiffmeyer Secretary of State.