## F000000000907

MJH

00789-001044-00611-02821-001e71

Tax Lien Section
Division of Corporations
P O Box 6327
Tallahassee, FL 32314

W - 25379

800003428018---2 -10/18/00--01012--001 \*\*\*\*\*\*70.00 \*\*\*\*\*\*70.00

RE: Convera Corporation

Attached please find our Application for Certificate of Authority to transact business in your state as a foreign corporation. We enclosed a copy of the Certificate of Incorporation of Exca holdings, Inc. from the state of Delaware, dated April 27, 2000. The name of the company will be changed to Convera Corporation.

If you have any questions, please do not hesitate to call me at (703) 761-5256. Thank you for your prompt attention to this matter.

Sincerely,

Carolyn S. Bae

Assistant Controller

Attachments

ON THE 13 PM 4: 21



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

October 20, 2000

CAROLYN S. BAE 1921 GALLOWS ROAD, SUITE 200 VIENNA, VA 22182

SUBJECT: CONVERA CORPORATION

Ref. Number: W00000025379

We have received your document for CONVERA CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report/uniform business report fees due this office.)

The registered agent must sign accepting the designation.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence, which usually consists of a single sheet of paper and clearly reflects the entity is avalid entity in its home state/country. You can obtain the certificate of existence from the same office that provided you with the certified copy.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Michelle Hodges Document Specialist

Letter Number: 400A00055043

## 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. Cons	vera Corporation		_
(Name of corpo	ration; must include the word "INCORPORATED", "	COMPANY", "CORPORATION" or	
words or abbrev	viations of like import in language as will clearly indic	ate that it is a corporation instead of a	
natural person o	or partnership if not so contained in the name at presen	it.)	
	114 YIV @ 3	54-19875 FI	
(State or country	y under the law of which it is incorporated)	(FEI number, if applicable)	
(Diate of County)		- 1- 1	
4. Apri	te of incorporation)  5, Per (Duration:	petual	<del></del>
(Dat	te of incorporation) (Duration:	Year corp. will cease to exist or "perpetual")	
1	12-12-11-00		
6. <u>upov</u>	a qualification (12/21/00 t transacted business in Florida.) (SEE SECTIONS 60	77 1501 607 1507 and 817 155 F S )	_
, 1921 0	Fallows Road, Suite	200, Vienna, VA 221	82
/·			
			_
	(Current mailing address)		
Dove	Lap Saftware		
8.	10P Software (s) of corporation authorized in home state or country	to be comind out in state of Florida)	_
(Purpose	(s) of corporation authorized in nome state of country	to be carried out in state of Floriday	
O Name and at	reet address of Florida registered agent: (P.O	Box or Mail Drop Box NOT acceptable)	
9. Name and st	leet addiess of Florida legistered agents (2.0	, <u></u>	
Name:	C T Corporation System		o ₹.,
Name:	C 1 Colporation System		<u> </u>
Office Address:	1200 South Pine Island Road		
Office Address.	1200 00411 1110	•	) <u>~</u> ~~
	Plantation	Florida, 33324	- - - - -
	Plantation	(Zin code)	- E
		` ^	
10 Posistored	agent's acceptance:	f:	: Se
10. Registereu	agent s acceptance.	_	, ≥≥
77	ned as registered agent and to accept service of proce	es for the above stated cornoration at the place des	ienated in
this application	ten as registered agent and to accept service of process. I hereby accept the appointment as registered agent a	and agree to act in this capacity. I further agree to	comply
with the provision	ns of all statutes relative to the proper and complete p	performance of my duties, and I am familiar with a	ınd accept
the obligations of	f my position as registered agent.	•	
	C T Corporation System	Hillary A. England	
		Assistant Secretary	
	(Registered agent's signatu	ure)	
11. Attached is a	certificate of existence duly authenticated, not more that	han 90 days prior to delivery of this application to the	ie

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.

<sup>12.</sup> Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable) FL019 - 9/2/99 C T System Online

A. DIRECTOI	S (Street address only - P.O. Box NOT acceptable)
Chairman: K	anald J. Whittier
Address:	21 Gallows Road, Suite 200, Viennia, VA 22182
Address:	
Address:	
Address:	
B. OFFICE	RS (Street address only - P.O. Box NOT acceptable)
President:	Patrick C. Condo
Address:	121 Gallows Road, Suite 200 1enna, VA 22182
Address:	
<del>-</del>	ames H. Buchanan
Address: 10	121 Gallows Road, Suite 200
	lenna, VA 22182
Treasurer:	James H. Buchanan (as above)
Address:	as above
<u>.</u>	
NOTE: If no	cessary, 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)
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)  James H. Buchanan, CFO
14	(Typed or printed name and capacity of person signing application)
	(1) had or hymner min and 1-1-1 to 1-1

## State of Delaware Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "CONVERA 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 NINTH DAY OF NOVEMBER,
A.D. 2000.

AND I DO HEREBY EURTHER CERTIFY THAT THE SAID "CONVERA CORPORATION" WAS INCORPORATED ON THE TWENTY-SEVENTH 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

AUTHENTICATION: 0784702

DATE: 11-09-00

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