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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

I.	'N COMPLIAN REGISTER A F	ICE WITH SE FOREIGN CO	ECTION 607 PRPORATIO	.1503, FLORIL N TO TRANSA	DA STATUTE CT BUSINE	S, THE FO	LLOWING	IS SUBMI	PED TO	0
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			aw of which i	t is incorporated))	(FEI	number, if a	pplicable)		
4	October 4		<u> </u>	, <u></u>	5. Perpet	ual				
	(D	ate of incorpor	ation)		(Duration)	on: Year con	p. will cease	to exist or "	perpetual	<u> </u>
6.	Upon qual		· .		<u>-</u> 		. <u>.</u> .			· _
	(Date first trans	sacted business	in Florida. I (SEE S	f corporation has ECTIONS 607.1	not transacted 501, 607.1502	d business in 2 and 817.155	Florida, inse 5, F.S.)	rt "upon qua	lification	ı.")
7.	8401 Cole:	sville Roa	d, Suite	305, Silver	Spring, N	Æ 209Į0				
				Principal office	•					
	8401 Coles	ville Road	i, Suite 3	305, Silver	Spring, M	ID 20910	5			
			(Current mailing a	address)	I.		<u> </u>		
8.				ecommunicati			et j			* .
	(Purpose	(s) of corporat	ion authorized	in home state or	country to be	carried out i	n state of Flo	orida)	· · · · · ·	
9.	Name and st	reet address	of Florida r	egistered agen	t: (P.O. Box	x or Mail Dr	op Box <u>NC</u>	<u>T</u> acceptal	ole)	
	Name:	Corporati	on Service	e Company		****				
Эf	fice Address:	1201 Hays	Street				_ •: **			÷ .
		Tallahass	ee		Ele	-:1- 32301	-			
			(City)		, Flo		code)			
Ia les ur	ther agree to	ned as registe s application, comply with t	ered agent at I hereby ac he provision	nd to accept ser cept the appoir is of all statutes the obligations	ument as reg s relative to :	ess for the a gistered age	above stated int and agree	e to act in		
	C	Corporation	n Service	Company						
				gistered agent's	signature)		***	<u></u>		_
			•		3					

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. DIRECTORS Chairman: See attached officers/directors rider Address: ___ Vice Chairman: Address: _____ Director: Address: _ Address: ______ **B. OFFICERS** President: See attached officers/directors rider Address: Vice President: Address: __ Secretary: Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. Gary Price, Treasurer and Assistant Secretary

(Typed or printed name and capacity of person signing application)

Attachment for GMN US Operations, Inc.

	Name	No. and Street	City, State and Zip
President	Doug Hudson	226 Finnegan Drive	Millersville MD 1108
Secretary	Liam McElhone	5029 MacArthur Blvd.	Washington QDE 20016
Treasurer and Assistant Secretary	Gary Price	20306 Baymeadow Ct.	Ashburn, VA 20147 بي Ashburn, VA 20147
Assistant Secretary	Matt Phillips	3444 White Admiral Court	Edgewater, MD 21037
Director	Doug Hudson	226 Finnegan Drive	Millersville, MD 21108
Director	Gary Price	20306 Baymeadow Ct.	Ashburn, VA 20147
Director	Matt Newton	505 Tennessee Avenue	Alexandria, VA 22305
Director	Jeff Patterson	3415 Halcyon Drvie	Alexandria, VA 22305

Office of the Secretary of State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GMN US OPERATIONS, INC." 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 FOURTH DAY OF JANUARY, A.D. 2001.

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

Harriet Smith Windson

AUTHENTICATION: 0893763

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DATE: 01-04-01