



THE UNITED STATES  
CORPORATION  
COMPANY

F01000000693

ACCOUNT NO. : 072100000032

REFERENCE : 989857 7164086

AUTHORIZATION :

*Patricia Pigott*

COST LIMIT : \$ 87.50

FILED  
01 FEB -6 PM 1:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : February 5, 2001

ORDER TIME : 10:03 AM

ORDER NO. : 989857-005

000003653840--3

CUSTOMER NO: 7164086

CUSTOMER: Ms. Jeanne Shreves  
Madras Packaging, Inc.  
401 E. Market Street  
Suite 104  
Charlottesville, VA 22902-5264

FOREIGN FILINGS

NAME: SYSTEMS SUPPORT ALTERNATIVES,  
INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
XX PLAIN STAMPED COPY  
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Joyce Markley -- EXT# 1130

EXAMINER: \_\_\_\_\_

REC'D  
01 FEB -6 AM 10:52  
DIVISION OF INFORMATION

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. SYSTEMS SUPPORT ALTERNATIVES, INC.

(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.)

2. MARYLAND

(State or country under the law of which it is incorporated)

3. 52-1647302

(FEI number, if applicable)

4. SEPTEMBER 11, 1989

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION

(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 14502 GREENVIEW DRIVE, #500, LAUREL, MD. 20708

(Principal office address)

SAME

(Current mailing address)

8. FACILITIES SUPPORT SERVICES

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee

(City)

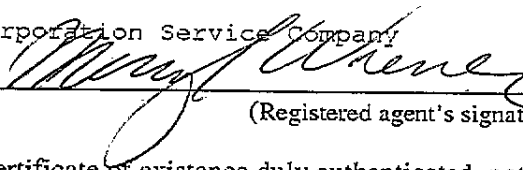
, Florida 32301

(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.*

Corporation Service Company



(Registered agent's signature)

MERYLL WIENER, 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 business addresses of officers and/or directors:

A. DIRECTORS

Chairman: DENISE BURNS

Address: \_\_\_\_\_

Vice Chairman: N/A

Address: \_\_\_\_\_

Director: N/A

Address: \_\_\_\_\_

Director: N/A

Address: \_\_\_\_\_

B. OFFICERS

President: TERRY GASKINS

Address: 14502 GREENVIEW DRIVE, #500  
LAUREL MD 20708

Vice President: TONI LEMIRE

Address: 14502 GREENVIEW DRIVE, #500  
LAUREL MD 20708

Secretary: TONI LEMIRE

Address: 14502 GREENVIEW DRIVE, #500, LAUREL, MD. 20708

Treasurer: CFO: JIM DOTSON

Address: 14502 GREENVIEW DRIVE, #500, LAUREL, MD 20708

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. [Signature]  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. James E Dotson CFO  
(Typed or printed name and capacity of person signing application)

01 FEB 16 PM 11:00  
FILED  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**STATE OF MARYLAND**  
**Department of Assessments and Taxation**

FILED  
01 FEB -6 PM 1:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, PAUL ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT SYSTEMS SUPPORT ALTERNATIVES, INC. IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS FEBRUARY 05, 2001.

*Paul B. Anderson*

Paul B. Anderson  
Charter Division

