F0100002/53

CORPORATION(S) NAME

VenServ, Inc.		759
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	,	
☆ Profit	() Amendment	() Merger
() Nonprofit		
Foreign	() Dissolution/Withdrawal	() Mark
	() Reinstatement	() 0.1
() Limited Partnership	() Annual Report	() Other
() LLC 2	() Name Registration () Fictitious Name	() Change of RA () UCC
Certified Copy	() Photocopies	V CUS
A STATE	() Thorocopies	
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	4/23/01	Order#: 3543405
Availability	\ \ \ /	
Document Examiner	\ /	Ref#:
Updater		
Verifier		
		Amount: \$

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615



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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO FRANSACT BUSINESS IN FLORIDA

	BUSINESS IN FLORIDA	
IN COMPLIANC REGISTER A FO	TE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO DREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.)
1. VenServ, Inc.		
(Name of corpor words or abbrev	oration; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or viations of like import in language as will clearly indicate that it is a corporation instead of a partnership if not so contained in the name at present.)	
2. Delaware	3 95-4786922	
	y under the law of which it is incorporated) (FEI number, if applicable)	5
4, 2/25/00	5. Perpetual	
	te of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	• •
	on; or approx. 3/15/01 It transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	:
7 30423 Canwoo	od Street, Suite 207, Agoura Hills, CA 91301	
••		
	(Current mailing address)	-
8. Lease Financin		
(Purpose)	e(s) of corporation authorized in home state or country to be carried out in state of Florida)	
9. Name and str	reet address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	
Name:	C T Corporation System	
Name.		
Office Address:	120 0 South Pine Island Road	
	Plantation , Florida, 33324	
	(Zip code)	
10. Registered	agent's acceptance:	
this application, I with the provision the obligations of	ned as registered agent and to accept service of process for the above stated corporation at the place designated. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply as of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept my position as registered agent. CT Corporation System (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

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

which it is incorporated.

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)	•			
Chairman: (Director) Robert D. Parker	- 1	<u> </u>	_aan ⊥ an an .ja	· 클
Address: 30423 Canwood Street, Suite 207, Agoura Hills, CA 91301	. =			
	1.			_* .
Vice Chairman: (Director) Leon Ladd			~	
Address: 30423 Canwood Street, Suite 207, Agoura Hills, CA 91301			, –	
		$\mathcal{O}(2^{n})$	2 0	
Director: Kewsong Lee				
Address: 30423 Canwood Street, Suite 207, Agoura Hills, CA 91301			8 y	
Director: Robert Glanville				<u> </u>
Address: 30423 Canwood Street, Suite 207, Agoura Hills, CA 91301				
		至	-77	•
B. OFFICERS (Street address only - P.O. Box NOT acceptable)		是 2		-
President: Robert D. Parker	s. 1	SEL	· 11	
Address: 30423 Canwood Street, Suite 207, Agoura Hills, CA 91301				
	1:	200	மு	
Vice President: N/A		· · · · · · · · · · · · · · · · · · ·		·
Address:				
Secretary: Maureen Williams			<u> </u>	MAXIFF.
Address: 30423 Canwood Street, Suite 207, Agoura Hills, CA 91301	-			. Jet
	<u> </u>			· · ·
Treasurer:	<u> </u>			
Address:				حصر ماند الله
NOTE: If necessary, you may attach an addendum to the application listing addit				
13	E	- -		-
(Signature of Chairman, Vice Chairman, or any officer listed in n 14. Maureen Williams, Secretary	umber 12 of the appl	lication)	<u></u> .	•
(Typed or printed name and capacity of person	signing application)			= 1 =

State of Delaware

Office of the Secretary of State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VENSERV, 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 NINETEENTH DAY OF APRIL, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAX HAVE BEEN PAID TO DATE.



Warriet Smith Windson Harriet Smith Windson, Secretary of State

AUTHENTICATION: 1089940

DATE: 04-19-01

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