Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H01000051641 8)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0383

From: Loyi A. Mackey, Corporate Paralegal Account Name PROGERS, TOWERS, BAILEY, ET AL

Account Number: 076666002273 Phone

: (904)398-3911

Fax Number

: {904}396-0663

FOREIGN PROFIT QUALIFICATION

ATSOCA, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00



H010000516418

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.

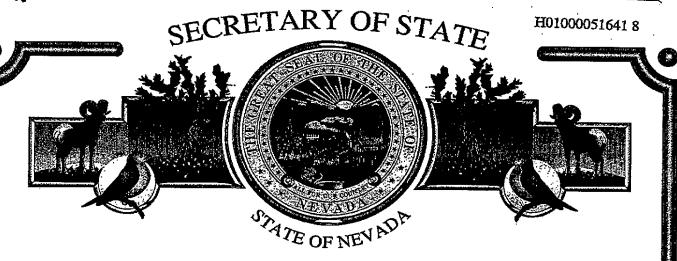
words or abb	NC. poration; must include the word "ING reviations of like import in language n or partnership if not so contained in	as will clearly indica	te that it is a corporation instead of	or f a
2. Nevada	t or partiessip it not so contained it		8-2501130	
(State or coun	try under the law of which it is incor		(FEI number, if applicable	e)
		5. Perpetual		
4. July 26, 1999	Date of incorporation)		Year corp. will cease to exis tor "p	erpetual")
6. Upon qualifi				
	irst transacted business in Florida.) (S	SEE SECTIONS 60	7.1501, 607.1502 and 817.155, F.S	<u>)</u>
7. 6630 Southp	oint Parloyay		•	
7. COSO BOLLEP	· · ·	<u> </u>		APR 27 AM 9: 23
<u>Jacksonville</u>				
	(Current:	mailing add ress)	•	27 A
			•	
	nd intellectual property holding comp			
(Purpo	se(s) of corporation authorized in hor	me state or country t	o be carried out in state of Florida)	
9. Name and	street address of Florida registe	ered agent: (P.O.	Box or Mail Drop Box <u>NOT</u> ac	cceptable)
	0.00	F .		
Name:	CT Corporation System			
Office Address	s: 1200 South Pine Island Road			•
	Provided as			
	Plantation		Florida, 33324 (Zip code)	
			(Zip code)	
10. Registere	d agent's acceptance:	•	•	,
this application with the provisi	amed as registered agent and to acce , I hereby accept the appointment as ons of all statutes relative to the pro of my position as registered agent C T Corporation System	s registered agent ar	d agree to act in this capacity. If formance of my duties, and I am VICKY GOLDST: SPECIAL ASSISTANT SI	further agree to comply familiar with and accept
	a certificate of existence duly author State, by the Secretary of State or other			

which it is incorporated.

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

H01000051641 8

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)	
Chairman: None	
Address:	
Director XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	•
Address: 6630 Southpoint Parkway	·
Jacksonville, FL 32216	
Director: Roger L. McClung	
Address: 6630 Southpoint Parkway	
Jacksonville, FL 32216	
Director: Sandra C. Ramsey	
Address: 6630 Southpoint Parkway	<u> </u>
Jacksonville, FL 32216	
B. OFFICERS (Street address only - P.O. Box NOT acceptable) Chief Executive Officer:	
R	= N
Address: 6630 Southpoint Parkway Jacksonville, FL 32216	<u>r </u>
Skeutive Vice President: Roger L. McClung	;
Address: 6630 Southpoint Parkway	
Jacksonville, FL 32216	
Secretary: Drew W. Prusiecki	
Address: 6630 Southpoint Parkway	
Jacksonville, FL 32216	
Treasurer: Sandra C. Ramsey	
Address: 6630 Southpoint Parkway	<u> </u>
Jacksonville, FL 32216	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	٠
13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
14. Drew W. Prusieski, Secretary	
(Typed or printed name and capacity of person signing application)	-



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, ATSOCA, INC., as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since July 26, 1999, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on Carson City, Nevada, on March 23, 2001.

Secretary of State

By S. J. Jaw

Certification Clerk

01 APR 27 AM 9: 23

H01000051641 8