FOLOUUU2365 **CORPORATION**

ACCOUNT NO. : 072100000032

REFERENCE

AUTHORIZATION

COST LIMIT

ORDER DATE: April 30, 2001

ORDER TIME : 10:40 AM

ORDER NO. :

134119-005

CUSTOMER NO:

4390076

CUSTOMER:

Mr. Michael Pratter

The Pratter Law Partnership

1147 Merritt Drive

El Cajon, CA 92020

200004133982--9

NAME:

XXXX QUALIFICATION

(TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Betty Young -- EXT# 1112

EXAMINER:

HUNDE

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. VERATRON | | <u></u> | | 20 | |
|--|--|--|---------------------------------------|--------------------------------------|---|
| (Name of corpo | ration; must include the word "INCORPORA viations of like import in language as will clear or partnership if not so contained in the name | arly indicate that it | NY", "CORPORA is a corporation in | nstead of a | 1 (S. 10 10 10 10 10 10 10 10 10 10 10 10 10 |
| 2. DELAWARE | | 3. <u>04-33</u> | <u>0_5797</u> | 77 | |
| (State or countr | y under the law of which it is incorporated) | · - | (FEI number, if | applicable) | 65 60 |
| 4. APRIL 20, | e of incorporation) | 5. PERPETUAL | | - | |
| (Dat | e of incorporation) | (Duration: Y | ear corp. will cea | se to exist or "per | petual") |
| 6. UPON QUALI | FICATION | | | | <u> </u> |
| (Date first transa | acted business in Florida. If corporation has (SEE SECTIONS 607.13 | not transacted busi 501, 607.1502 and | ness in Florida, ir 817.155, F.S.) | nsert "upon qualifi | cation.") |
| 7. 318 INDIAN | TRACE BOX 116, WESTON, FL 333 | 26 _ | · | - | |
| | (Principal office a | iddress) | * | 0 | ¥ . |
| 318 INDIAN | TRACE BOX 116, WESTON, FL 333 | 26 | | 128 | - |
| | (Current mailing a | address) | 1 , | S. CHANS | |
| 8 | Electronic Technolo | g y | | | |
| (Purpose | (s) of corporation authorized in home state or | r country to be carr | ned out in state of | Florida) PS | (5) |
| 9. Name and str | reet address of Florida registered ager | at: (P.O. Box or | Mail Drop Box | NOT acceptable | e) |
| Name: | Corporation Service Company | - | | P. | Œ. |
| Office Address: | 1201 Hays Street | | ī | ·· . | |
| | Tallahassee | , Florida | 32301 | <u>.</u> | |
| | (City) | | (Zip code) | * - | |
| Having been nad designated in the further agree to | agent's acceptance: med as registered agent and to accept so is application, I hereby accept the appo- comply with the provisions of all statut of familiar with and accept the obligation | intment as regist es relative to the | tered agent and proper and con | agree to act in t nplete performa | this capacity. I |
| | Corporation Service Company | 1 | | · | |
| • | (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 which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

| Chairman: See attached officers/directors rider | r | | <u></u> |
|--|------------------|---------------------------------------|-----------------------|
| Address: | en · | | |
| | | | 100 |
| Vice Chairman | | | |
| Vice Chairman: | | | |
| Address: | | | C. C. S. |
| | | | |
| Director: | | | |
| Address: | | | |
| | | | |
| | | | · |
| Director: | | | |
| Address: | <u> </u> | v | 7.0 2 . |
| | | , , , , , , , , , , , , , , , , , , , | - PE |
| B. OFFICERS | | | |
| President: See attached officers/directors rider | | | SSE |
| | | | 710 3 |
| Address: | | | |
| | <u></u> | | - BE 5 |
| Vice President: | | | |
| Address: | | | |
| | | | |
| | | | |
| Secretary: | | | |
| Address: | | | |
| reasurer: | •••• | | <u></u> |
| address: | - | - <u></u> | |
| | | | |
| IOTE: Marcessary, you have attack an addendum to the app | olication listin | ng additional offic | ers and/or directors. |
| 3. MM MMM Claures | · · / | In Jan | |
| (Signature of Chairman, Vice Chairman, or a | ny officer list | ed in number 12 o | of the application) |
| 4. MICHAEL PRATTER, SECRETARY | | | |
| (Typed or printed name and capacity | of person sig | ning application) | |

OFFICER / DIRECTOR RIDER

OFFICERS: MICHAEL S. PRATTER – CHAIRMAN & SECRETARY STEVE KUZARA- PRESIDENT

DIRECTORS: MICHAEL S. PRATTER STEVE KUZARA CHARLES ROBERTSON RON CHALMERS



FILED

ON WAY -3 PM 12: 49

SECRETARIS OF STATE
SECRETARISSEE, FLORIDA

State of Delaware Office of the Secretary of State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VERATRON 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 FIRST DAY OF MAY, A.D. 2001.

AND I_DOTHEREBY FURTHER CERTIFY THAT THE ERANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

O1 MY -3 PM 12: 49
SEGRETING OF STATE
SEGRETING OF STATE



Warriet Smith Windson Harriet Smith Windson, Secretary of State

AUTHENTICATION: 1108555

3383486 783.00 -

010207811

DATE: 05-01-01