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Florida Department of State
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TALLAHASSEE, FLORIDA

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FOREIGN PROFIT QUALIFICATION
SA DEL I, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 MAY 18 PM 2:25

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Certificate of Status	0
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Estimated Charge	\$70.00

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1501, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

- 1. SA DEL I 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. DELAWARE 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
- 4. MARCH 1, 2001 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
- 6. UPON QUALIFICATION
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
- 7. 350 CAMINO GARDENS BLVD., SUITE 303
BOCA RATON, FL 33432
(Current mailing address)

8. GENERAL PARTNER OF LIMITED PARTNERSHIP
(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: CT Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida, 33324
(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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.
CT Corporation System PETER F. SOUZA
"REGISTERED SECRETARY"
(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 addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)
FILED 12-30-01 CT System Online

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: SCOTT H. ADAMS

Address: 350 CAMINO GARDENS BLVD., SUITE 303

BOCA RATON, FL 33432

Director: _____

Address: _____

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SECURITY
TALLAHASSEE FLORIDA

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: SCOTT H. ADAMS

Address: 350 CAMINO GARDENS BLVD., SUITE 303

BOCA RATON, FL 33432

Vice President: _____

Address: _____

Secretary: SCOTT H. ADAMS

Address: 350 CAMINO GARDENS BLVD., SUITE 303

BOCA RATON, FL 33432

Treasurer: SCOTT H. ADAMS

Address: 350 CAMINO GARDENS BLVD., SUITE 303

BOCA RATON, FL 33432

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

13. *Scott H. Adams*

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

14. SCOTT H. ADAMS, PRESIDENT

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

State of Delaware
Office of the Secretary of State

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SA DEL I 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 SECOND DAY OF MARCE, A.D. 2001.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1000879

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DATE: 03-02-01