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| September 5, 20 SINVICES CORPORATION NAME (S) AND DOCUMENT NUMBE Wellspring Solutions, Inc. Filing Evidence Plain/Confirmation Copy Cortificate of Status | · _ |
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| CORPORATION NAME (S) AND DOCUMENT NUMBE Wellspring Solutions, Inc. Filing Evidence Plain/Confirmation Copy □ Certificate of Status | 001 |
| Wellspring Solutions, Inc. Filing Evidence □ Plain/Confirmation Copy □ Certificate of Status | • ' |
| Filing Evidence ☐ Plain/Confirmation Copy ☐ Certificate of Status ☐ Certific | K (S): |
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| Contifor Comme | |
| ☐ Certified Copy ☐ Certificate of Good Standing | |
| □ Articles Only | |
| Retrieval Request ☐ All Charter Documents to Include Articles & Amendments ☐ Photocopy ☐ Fictitious Name Certificate | de |
| ☐ Certified Copy ☐ Other ☐ Other ☐ Oo0045722: -09/06/01010 | 42009 |
| NEW FILINGS AMENDMENTS ******70.00 *** | ****70.00 |
| Profit Amendment | _ |
| Non Profit Resignation of RA Officer/Director | |
| Limited Liability Change of Registered Agent | |
| Domestication Dissolution/Withdrawal | = |
| Other Merger | |

| OTHER FILINGS | | |
|---------------|------------------|--|
| | Annual Reports | |
| | Fictitious Name | |
| | Name Reservation | |
| | Reinstatement | |

| REGISTRATION/QUALIFICATION | | |
|----------------------------|-------------------|--------|
| X | Foreign | 98/ |
| | Limited Liability | 3 |
| | Reinstatement | :0: 13 |
| | Trademark | FIGURY |
| | Other | TO S |

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| IN COMPLIAN | CE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO |
|---|--|
| | STATE OF FLORIDAC |
| (Name of corn | PRING SOLUTIONS, INC. |
| | 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 or partnership if not so contained in the name at present.) |
| 2Delaw | are a second of the second of |
| (State or country | y under the law of which it is incorporated) (FEI number, if applicable) |
| 4. March | (= 21 indimote) |
| T. March | |
| | . "Car corp. will cease to exist or "perpetual") |
| 6(| Joan qualification acted business in Florida If comparation has not transfer to the second se |
| • | (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) |
| 74 Hutt | on Centre, Suite 300, Santa Ana, CA 92707 |
| | (Principal office address) |
| 4 Hutt | on Centre, Suite 300, Santa Ana, CA 92707 |
| | (Current mailing address) |
| 3. Sale o | f software and related services s) of corporation authorized in home state or country to be carried out in state of Florida) |
| | eet address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) |
| Name: | NRAI Services, Inc. |
| Office Address: | 526 E. Park Avenue |
| | Tallahassee. Florida 32301 |
| r | , Florida 32301 |
| | (City) (Zip code) |
| Iaving been nan esignated in this urther agree to c | gent's acceptance: ned as registered agent and to accept service of process for the above stated corporation at the place application, I hereby accept the appointment as registered agent and agree to act in this capacity. I comply with the provisions of all statutes relative to the proper and complete performance of my |
| uues, ana 1 am j | annual with and accept the ooligations of my position as registered agent. |
| | NRAI SERVICES, INC. |
| _ | Registered agent's signature) |
| | (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 Vice Chairman: ___ Address: _ Director: ___ Address: Director: _ Address: **B. OFFICERS** President: See attached officers/directors rider Address: __ Vice President: ____ Address: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) DANIEL T. NICHOLS VICE PRESIDENT (Typed or printed name and capacity of person signing application)

RIDER TO APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

OFFICERS AND DIRECTORS OF WELLSPRING SOLUTIONS, INC.



A. DIRECTORS

| Name | Address |
|-------------------|--|
| Charles D. Martin | 610 Newport Center Drive, Suite 1350 Newport Beach, CA 92660 |
| Mark Hastings | BCI Partners 283 Dartmouth Street Boston, MA 02116 |
| Richard L. Essex | BCI Partners Glenpointe Centre West Teaneck, NJ 07666-6883 |

B. OFFICERS

| Name | Address |
|--|---|
| Charles R. Harris, President and Chief | 9 Coronado Pointe |
| Executive Officer | Laguna Niguel, CA 92677 |
| Daniel T. Nichols, Vice President of | 10 Circle Hill Court |
| Operations and Secretary | Laguna Niguel, CA 92677 |
| Ramiro A. Ramirez, Vice President of Sales | 23110 Fox Creek Farmington Hills, MI 48335 |
| Victor L. Rice, Vice President of Professional | 2902 W. Elm Circle |
| Services | Katy, TX 77493 |

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 "WELLSPRING SOLUTIONS, INC. SLY 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 TWENTY-NINTH DAY OF AUGUST, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WELLSPRING SOLUTIONS, INC." WAS INCORPORATED ON THE SEVENTEENTH DAY OF MARCH, A.D. 2000.

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

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

Harriet Smith Windson, Secretary of State

3195782 8300

AUTHENTICATION: 1321121

010429280

DATE: 08-29-01