F01000005635

TRANSMITTAL LETTER

| TO: Registration Division o | n Section f Corporations |
|---|---|
| SUBJECT: | V3 Systems, INC. |
| | (Name of corporation - must include suffix) |
| Dear Sir or Madam | · • |
| The enclosed "App "Certificate of Exist to transact business | |
| Please return all co | Tespondence concerning this matter to the following: -09/24/0101071002 ******70.00 ******70.00 |
| | (Name of Person) |
| | V3 Systems, Inc (Firm/Company) |
| | |
| | 15800 JOHN J. DELANEY DR. SUITE 550 (Address) |
| | |
| | CHARLOTTE NC 28277 (City/State and Zip code) |
| For further informat | ion concerning this matter, please call: |
| Justin KER (Name of P | n at (704) 248-0145 ASS 9 |
| (Name of P | FIL FIL |
| STREET ADDRES Registration Section Division of Corporat 409 E. Gaines St. Tallahassee, FL 323 | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 |
| Enclosed is a check t | or the following amount: |
| 図 \$70.00 Filing Fee | ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy |

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.

| (Name of corporation; must include the word "NCORPORATED", "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. NORTH CARBLINA (State or country under the law of which it is incorporated) 4. OCTOBER 7, 1992 (Date of incorporation) (Date of incorporation) (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 7. 15800 John J. Delangy Dr. Suite 550 Charlotte, NC 28277 (Principal office address) 8. Software Sales (Current mailing address) 8. Software Sales (Current mailing address) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) PROFILE ORGELLI Office Address: 4876 Saral Lake Circle Saralota (City) 10. Registered agent's acceptance: Having been named as registered deent 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. | 1. V3 Systems, Inc | |
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| natural person or partnership if not so contained in the name at present.) 2. NORTH CARBLINA (State or country under the law of which it is incorporated) 4. OCTOBER 7, 1992 (Date of incorporation) 6. UPON QUALIFICATION (Dete first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 7. 15800 John J. Delaney Dr. Suite 556 Charlotte, NC 28277 (Principal office address) 8. Software Sales (Current mailing address) 8. Software Sales (Current mailing address) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Michael Porcella Office Address: 4876 Sabal Lake Circle Sarafora (City) 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 relative to the proper and complete performance of my duttes, and I am familiar with and accept the obligations of my position as registered agent. | (Name of corporation; must include the word "INCOPPORATED" "COLOR AND "COLOR | |
| 2. North Carolina 3. 56-1794355 (State or country under the law of which it is incorporated) 4. October 7, 1992 (Date of incorporation) 6. UPON Gualification (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 7. 15800 John J. Delaney Dr. Suite 550 Charlotte, NC 28277 (Principal office address) Same (Current mailing address) 8. Software Sales (Current mailing address) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Principal Office Address: 4876 Saral Lake Circle Saralota (City) 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. | | |
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| duties, and I am familiar with and accept the obligations of my position as registered agent. | further garage to comply wild it | 2. T |
| Description of my position as registered agent. | | • • |
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| / Illunos (Janus) | | |
| | / //what / fore | |
| (Registered agent's signature) | (Registered agent's signature) | • • • |
| (Registered agent's signature) | Description as registered agent. | • • . |

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: | <u> </u> | | <u>.</u> | · · · · · | | <u> </u> |
| Address: | | _ · <u></u> | | | | <u> </u> |
| | | <u> </u> | | | | |
| Vice Chairman: | | | | .4 - | | |
| Address: | | | | | | |
| | | | | | | |
| Director: | | | | | | |
| Address: | | | | | <u>-i</u> | |
| | | | | - | - : :- | - <u>1-</u> - |
| Director: | | | <u>· </u> | | | · |
| Address: | | | · <u>· · · ·</u> | | | |
| | | | | | - | |
| OFFICIANG | | <u>:</u> | | <u> </u> | • == | |
| B. OFFICERS | | | | | | |
| resident: C. ASHLEY CAMPBELL | | las · · | <u> </u> | TASE S | 9 | |
| Address: 5409 FRESCOE CT | | | | LASS. | <u> </u> | |
| CHARLOTTE, NC 28277 | | | | ASS | - P - P - P - P - P - P - P - P - P - P | <u>.</u> |
| ice President: VAM WEISS | _ | | <u> </u> | EF, | 7 [| |
| ddress: 10406 SUNDANCE CT | | <u>. </u> | _ | 107± | |) . . |
| CHARLOTTE, NC 28277 | | _ | | ADA TE | 03 | |
| ecretary: | | | | | | : |
| ddress: | | | | | <u> </u> | <u></u> |
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| ddress: | · | - <u></u> | | | | <u> </u> |
| | | · <u>—</u> · <u> </u> | | | <u>-</u> | |
| OTE: If necessary, you may attach an addendum to the application | ion listing a | dditional of | ficers and/ | or directo | rs. | |
| Chh. I hil | | | | | | |
| (Signature of Chairman, Vice Chairman, or any of | ficer listed i | n number 1 | 2 of the ap | plication) | _ - | |
| . C. ASHLEY CAMPBELL PRESIDENT (Typed or printed name and capacity of pe | + CEO | | | • | | |



NORTH CAROLINA

Department of The Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

V3 SYSTEMS, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 9th day of October, 1992, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



IN WITNESS WHEREOF, I Toychereunto set my hand and affixed my official seal at the City of Raleigh, this 23rd day of August, 2001.

Plaine I. Marshall

Secretary of State

Certification Number: 5677802-3 Page: 1 of 1 Ref.# 4653734-YC Verify this certificate online at www.secretary.state.nc.us/Verification.