Requisiter's Name Address	000	05363
City/State/Zip Phone #		Office Use Only
CORPORATION NAME(S) & DOCUM	ENT NUMBER(S), (if l	known):
1. Computer Networking (Corporation Name)	g Technologies (Documents#)	Corporation
2. (Corporation Name)	(Document #)	DEPARIM TALLAHA
4. (Corporation Name) (Corporation Name) Walk in Pick up time	(Document #)	CEIVED CI - MIIIIHH CI - MIIIHH CI - MIIHH CI - MIIIHH CI - MIIIHH CI - MIIIHH CI - MIIIHH CI - MIIHH CI - MIIIHH CI - MIIIHH CI - MIIHH CI
Mail out Will wait	Photocopy	Certified Copy Certificate of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other		
OTHER FILINGS	REGISTRATION/QUA	ALIFICATION
Annual Report Fictitious Name	\checkmark	 000046180395_
CR2E031(7/97)		Examiner's Initials



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

October 1, 2001

LEXIS

TALLAHASSEE, FL

SUBJECT: COMPUTER NETWORKING TECHNOLOGIES CORPORATION

Ref. Number: W01000022635

We have received your document for COMPUTER NETWORKING TECHNOLOGIES CORPORATION and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

Please note that we have RETAINED your \$87.50 payment.

The application indicates that this corporation began transacting business in Florida in 1999. If this is so, then penalty fees are owed.

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$2,300.00.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Corporate Specialist

Letter Number: 101A00055095

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

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STAREGISTER A FOREIGN CORPORATION TO TRANSACT BU	TUTES, THE FOLLOWING IS SUBMITTED TO
1Computer Networking Technologies	Corporation 55 5 M
(Name of corporation; must include the word "INCORPORATED" words or abbreviations of like import in language as will clearly in natural person or partnership if not so contained in the name at pre-	Wicald High It is a comparation instead of a 1997 1997
and an person of partnership it not so contained in the name at pre-	sent.)
2. Illinois33	36-4268635 夏 帝 次
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
4. <u>January 26, 1999</u> 5.	Paratual
(Date of incorporation) (I	Duration: Year corp. will cease to exist or "perpetual")
6. <u>October 11</u> , 1999	perpetual)
(Date first transacted business in Florida. If corporation has not transacted business in Florida.	- The state of the
(SEE SECTIONS 607.1501, 60	nsacted business in Florida, insert "upon qualification.") 7.1502 and 817.155, F.S.)
7. 800 8th Ave. West, Suite 7, Palmetto, F	L 34221
(Principal office address)
P. O. Box 1088, Palmetto, FL 34220-1088	
(Current mailing address	
	,
8. The transaction of any or all lawful purp	oses for which concretions were
(Purpose(s) of corporation authorized in home state or country	ry to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.	·
Name: <u>Molly Noel Brockhoff</u>	_
Office Address: 800 8th Ave. West, Suite 7	<u>~</u>
_Palmetto	Florida 34221
Palmetto (City)	(Zip code)
	(
10. Registered agent's acceptance:	
Having been named as registered agent and to accept service of designated in this application, I hereby accept the appointment for the grant of the complex with the provisions of the second s	of process for the above stated corporation at the place
artice as ee to comply wan the provisions of all statutes relat	ive to the proper and complete
duties, and I am familiar with and accept the obligations of my	y position as registered agent.
	- •
.1(. 3
Main Dail Brockha	<i>4.</i> /

(Registered agent's signature)

under the law of which it is incorporated.

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

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

A. DIRECTORS					•	
Chairman: Molly Noel Brockhoff	<u>. </u>	<u>.</u>	. <u> </u>	+	• - *	سد دخور د دد
Address: 800 8th Ave. West, Suite 7	<u></u>	<u></u> =	_ +	TAL SE	2	
Palmetto, FL 34221					8 71	
Vice Chairman: John Alvin Brockhoff					or in	_
Address: Same as above				Lu &	20	_
				73	ين الله	_
Director:					'r., 'U	- :
Address:					<u> </u>	
						_
Director:						
						_ =
Address:						_
B. OFFICERS					*	<u>-</u>
					•	
President: <u>Molly Noel Brockhoff</u>						<u>.</u>
Address: Same as above	<u> </u>				<u> </u>	
						_
Vice President: <u>John Alvin Brockhoff</u>						<u>.</u>
Address: Same as above		-	· _ ·			
	s a. See	· .		<u> </u>	-9 s	# \rac{1}{10000000000000000000000000000000000
Secretary: Molly Noel Brockhoff						
Address: Same as above			<u>. </u>		,	
Treasurer:John Alvin Brockhoff					- 4.	/
Address: Same as above						.t
NOTE: If necessary, you may attach an addendum to the	e application li	sting additio	nal officer	s and/or direct	ors.	
13. Signature of Chairman, Vice Chairman,				<u>.</u>	_	y - ::
Signature of Chairman, Vice Chairman,			ber 12 of	the application	1)	
14. <u>Molty Noel Brockhoff</u> (Typed or printed name and capa	ecity of person	residen	1t_			LG



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE JANUARY 26, 1999, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE FILING OF ANNUAL REPORTS AND PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN STATE OF ILLINOIS***********



In Testimony Whereof, I, hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this ______27TH____ day of ______ SEPTEMBER A.D.

Lexis Deuments Requisiter's Name Address	1000005363
CORPORATION NAME(S) & DOG	Office Use Only
	CUMENT NUMBER(S), (if known):
2(Corporation Name) 3(Corporation Name) 4(Corporation Name) Walk in Pick up time Mail out Will wait NEW FILINGS Profit	Certified Copy
Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS Annual Report Fictitious Name	REGISTRATION/QUALIFICATION Foreign 9□00045180395 Limited Partnership -10/15/0101044016 Reinstatement ***2300.00 ****2300.00 Trademark Other
CR2E031(7/97)	Examiner's Initials



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

October 1, 2001

LEXIS

TALLAHASSEE, FL

SUBJECT: COMPUTER NETWORKING TECHNOLOGIES CORPORATION Ref. Number: W01000022635

We have received your document for COMPUTER NETWORKING TECHNOLOGIES CORPORATION and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

Please note that we have RETAINED your \$87.50 payment.

The application indicates that this corporation began transacting business in Elorida in 1999. If this is so, then penalty fees are owed.

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$2,300.00.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Corporate Specialist

Letter Number: 101A00055095

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 SOLUTION TO TRANSACT BUSINESS IN THE SOLUTION TO TRANSACT BUSINES	
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. 1. Computer Networking Technologies Corporation (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will elegably indicate the control of t	
1. Computer Networking Technologies Corporation (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. Illinois 3. 36-4268635	
2. <u>Illinois</u> 3 36_4269625	
2. 111inois 3. 36-4268635 (State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. <u>January 26, 1999</u> 5. <u>Perpetual</u>	
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	æ,
6 October 11 1000	
Oate first transacted husiness in Florida, IS annual 1	
(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. 800 8th Ave. West, Suite 7, Palmetto, FL 34221	
(Principal office address)	~
P. O. Box 1088, Palmetto, FL 34220-1088	
(Current mailing address)	: -
- <i>'</i>	
8. The transaction of any or all lawful purposes for which coporations may incorporate. (Purpose(s) of corporation authorized in home state or companies to the contract of the coporation of t	
(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: Molly Noel Brockhoff	
	-
Office Address: _800 8th Ave. West, Suite 7	-
Palmetto, Florida_34221	
(City) , Florida 34221 (Zip code)	
(Zip code)	
0. Registered agent's acceptance:	
Having been named as registered agent and to accept service of process for the above stated corporation at the place lesignated in this application. I hereby accept the appointment as project to a project the above stated corporation at the place	
lesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I ourther agree to comply with the provisions of all statutes relative to the	
urther agree to comply with the provisions of all statutes relative to the proper and agree to act in this capacity. I luties, and I am familiar with and accept the obligations of my position as registered agent.	
r of my position 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. DIRECT	ORS Molly Noel Brockhoff	
		10. 9
Address	800 8th Ave. West, Suite 7	P. 8 71
Vice Chairman	Palmetto, FL 34221 John Alvin Brockhoff	SE SE
	Same as above	The state of the s
Director:		<u></u>
<u>-</u>		
Director:		
	s of the second	
B. OFFICER		
President:	Molly Noel Brockhoff	
Address:	Same as above	<u> </u>
Vice President:	John Alvin Brockhoff	
	Same as above	
	Molley World Describers	· · · · · · · · · · · · · · · · · · ·
	Molly Noel Brockhoff	
	Same as above	
	John Alvin Brockhoff	
Address:	Same as above	
NOTE: If nece	essary, you may attach an addendum to the application listing additional officers an	d/or directors.
13	holy Voel Brockhof/	
14	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the solly Noel Brockhoff President (Typed or printed name and capacity of person signing application)	application)



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that



In Testimony Whereof, I, hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this _____ day of _____ SEPTEMBER A.D. __