

F01 0000005444⁴

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CORTECHS, INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

JOEL P. STEIGMAN
(Name of Person) 900004639199--2
CORTECHS, INC.
(Firm/Company) -10/17/01--01022--004
*****78.75 *****78.75
5900 CENTREVILLE RD., SUITE 208
(Address)
CENTREVILLE, VA 20121
(City/State and Zip code)

For further information concerning this matter, please call:

JOEL STEIGMAN at (703) 968-7021
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

01 OCT 17 AM 1:55
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

mtw
10/18

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. CORTECHS, 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. VIRGINIA 3. 54-1839388
(State or country under the law of which it is incorporated) (FBI number, if applicable)

4. FEB. 3, 1997 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION
(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. 5900 CENTREVILLE RD., SUITE 208, CENTREVILLE, VA 20121
(Principal office address)

(Current mailing address)

8. PROVISION OF INFORMATION TECHNOLOGY PRODUCTS AND SERVICES.
(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: ROBERT L. LINTON
Office Address: 16208 HARBOUR VISTA CIRCLE
ST. AUGUSTINE, Florida 32084
(City) (Zip code)

FILED
01 OCT 17 AM 1:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Robert L. Linton
(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: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: JAY S. WIENER

Address: 5900 CENTREVILLE RD., SUITE 207
CENTREVILLE, VA 20121

Vice President: _____

Address: _____

Secretary: _____


Address: _____

Treasurer: _____

Address: _____

FILED
01 OCT 17 AM 1:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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

14. JOEL P. STEIGMAN - DIRECTOR OF CONTRACTS
(Typed or printed name and capacity of person signing application)

Commonwealth of Virginia



State Corporation Commission

I Certify the Following from the Records of the Commission:

CorTechs, Inc. is a corporation existing under and by virtue of the laws of Virginia, and is in good standing.

The date of incorporation is February 03, 1997.

Nothing more is hereby certified.

FILED
01 OCT 17 AM 1:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*Signed and Sealed at Richmond on this Date:
October 9, 2001*



Joel H. Peck
Joel H. Peck, Clerk of the Commission