F6100005626

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations 400004655124---4 -10/26/01--01063--001 ******87.50 *****87.50

d.

SUBJECT: ____EPOS CORPORATION

(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:

	Michael Lightf	oot, Controller		· · · · ·
		Name of Person)		<u> </u>
	EPOS Corpo:	ration		
		irm/Company)		** <u>**</u> ** - • • • •
<u> </u>	1// Technolog	<u>gy Parkway, P O Box</u>	3140	<u> </u>
		(Address)		
· · · · · · · · · · · · · · · · · · ·	Auburn, A	L 36831-3140	<u> </u>	
	(City	/State and Zip code)		<u> </u>
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For further information	concerning this matter, p	blease call:		
	0 /1			<u> </u>
<u>Michael Ligh</u>	tfoot ()		SSEE	
(Name of Perso		<u>334</u>) <u>321-3767</u> (Area Code & Daytime Telep	$\frac{\text{Ext } 7402}{\text{hope Number}} \stackrel{\text{F}}{=} 0$	
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STREET ADDRESS:				
Registration Section		MAILING ADDRE Registration Section	SS:	
Division of Corporation	s	Division of Corporation)IIS	-
409 E. Gaines St.		P.O. Box 6327		
Tallahassee, FL 32399		Tallahassee, FL 3231	4	
Enclosed is a check for t	the following amount:			
□ \$70.00 Filing Fee	Certificate of Status	Certified Copy	\$87.50 Filing Fee, Certificate of State Certified Copy	us &

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Se

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 dutles, and I am familiar with and accept the obligations of my position as registered agent.

DALE W. MORRIS Dale H. Monio (Registered agent's signature) . چ **ASSISTANT VICE PRESIDENT**

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:

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A. DIRECTORS

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Chairman: Michael A. Lawler	
Address: 22283 Hwy. 498	
Tallassee, AL 36078	
Vice Chairman: <u>James F. Byrd</u>	
Address:813 Moores Mill Drive	
<u>Auburn, AL 36830</u>	
Director:A. Johnson	
Address:171_Asheton_Lane	
Auburn, AL 36830	
Director:	
Address:	
	1
B. OFFICERS	
President:Michael A. Lawler	
Address: 22283_Hwy. 49 S.	
Tallassee, AL 36078	
Vice President:James F. Byrd	
Address: 813 Moores Mill Drive	
Auburn, AL 36830	
Secretary:	
Address:171 Asheton Lane, Auburn, AL 36830	
Treasurer:	* in any -1
Address:	
NOTE: If necessary, you may attach an addendum to the application listing addition	al officers and/or directors.
13	
(Signature of Chairman, Vice Chairman, or any officer listed in numb	per 12 of the application)
14 Michael A. Lawler, President	
(Typed or printed name and conscite of name size in the second	· · · ·

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

