

Division of Corporations

F01000005855**Florida Department of State**Division of Corporations
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**FOREIGN PROFIT QUALIFICATION****Unit 8 Compnents Corp.**

Certificate of Status	1
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**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. Unit 8 Components Corp.

(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. Delaware

(State or country under the law of which it is incorporated)

3. 59-3754311

(FEI number, if applicable)

4. October 31, 2001

(Date of incorporation)

5. Perpetual

(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 §17.155, F.S.)

7. 12565 Research Parkway, Suite 300

(Principal office address)

Orlando, FL 32826

(Current mailing address)

8. distribution of electronic components

(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: CorpDirect AgentsOffice Address: 103 North Meridian St., Lower LevelTallahassee

(City)

Florida 32301

(Zip code)

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.

Pam Wolfe

(Registered agent's signature)

Pam Wolfe: It's 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.

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State of Delaware
Office of the Secretary of State

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PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "UNIT 8 COMPONENTS CORP." IS DULY 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 THIRTY-FIRST DAY OF OCTOBER, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "UNIT 8 COMPONENTS CORP." WAS INCORPORATED ON THE THIRTY-FIRST DAY OF OCTOBER, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

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Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Lynne M. InnesAddress: Taxi Way, Hillend Industrial EstateDunfermline, Fife KY11 9JT Scotland United KingdomDirector: George InnesAddress: Taxi Way, Hillend Industrial EstateDunfermline, Fife KY11 9JT Scotland United Kingdom01 NOV 79 PM 4:12
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B. OFFICERS

Vice President: Thomas HarrisAddress: 12565 Research Parkway, Suite 300Orlando, FL 32826Vice President: Lynne M. InnesAddress: same as aboveSecretary: Thomas HarrisAddress: same

Treasurer: _____

Address: _____

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

13. [Signature]

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

14. Thomas Harris, Vice President

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

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