REFERENCE : 645216

COST LIMIT :

ORDER DATE: January 9, 2002

ORDER TIME : 10:36 AM

ORDER NO. : 645216-005

200004761842--4--

CUSTOMER NO: 5051651

CUSTOMER: Mr. Anthony Varrone

Greenberg Traurig, P.a. 450 South Orange Avenue

6th Floor

Orlando, FL 32801

## FOREIGN FILINGS

NAME:

ARTIA, INC.

XXXX QUALIFICATION

(TYPE: CO)



PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX\_\_\_\_ CERTIFIED COPY PLAIN STAMPED COPY

\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds -- EXT# 1133

EXAMINER:

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

2

				TUTES, THE FOLLOWING TO SUBMITTED TO	0
1.	ARTIA, INC. (Name of corporation; must of like import in language contained in the name at pre	as will clearly indicate that it is a	D", "COMPA corporation i	ANY", "CORPORATION" or words or abbreviations instead of a natural person or partnership is not so	<b>う</b>
2.	DELAWARE		_ 3.	59-3761425	<u>-</u>
	(State or country under the	he law of which it is incorporated)		(FEI number, if applicable)	
4.	DECEMBER 11, 20			PETUAL	_
	(Date of incorpo	ration)	(Dura	ration: Year corp. will cease to exist or "perpetual")	
6.	ONCE COMPANY HAS BEEN QUALIFIED IN FLORIDA  (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)				
7.	12565 RESEARCH PARKWAY, SUITE 300				
	ORLANDO, FLORIDA 32826				
(Current mailing address)					
8.	E-LEARNING/E-TRAINING TOOLS AND SYSTEMS				
	(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:	CORPORATION SERVICE	E COMPA	INY	
	Office Address:	1201 HAYS STREET		<del></del>	
		TALLAHASSEE		, Florida <u>32301</u> (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.					
	,			Brian Courtney	

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.

(Registered agent's signature)

Asst. V. Pres.

**DIRECTORS** (Street address only - P.O. Box NOT acceptable) Chairman: BEVERLY KITAOKA Address: 12479 RESEARCH PARKWAY ORLANDO, FLORIDA 32826 Vice Chairman: Address: \_\_\_ Director: \_RICHARD LAIRD Address: \_12565 RESEARCH PARKWAY, SUITE 300 ORLANDO, FLORIDA 32826 Director: RICHARD FOX Address: 12565 RESEARCH PARKWAY, SUITE 300 ORLANDO, FLORIDA 32826 B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: RICHARD LAIRD Address: 12565 RESEARCH PARKWAY, SUITE 300 ORLANDO, FLORIDA 32826 Vice President: \_\_\_\_\_ Address: \_\_\_\_\_ Secretary: RICHARD LAIRD Address: 12565 RESEARCH PARKWAY, SUITE 300 ORLANDO, FLORIDA 32826 Treasurer: RICHARD LAIRD Address: 12565 RESEARCH PARKWAY, SUITE 300 ORLANDO, FLORIDA 32826 NOTE: If necessary, you may attach an addengam to the application listing additional officers and/or directors. 13. of any officer listed in number 12 of the application) 14. RICHARD LAIRD, PRESIDENT/CHIEF EXECUTIVE OFFICER (Typed or printed name and capacity of person signing application)

12: Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

PAGE 1

## Delaware

## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "ARTIA, INC." 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 TWENTY-SIXTH DAY OF DECEMBER, A.D.
2001.

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

02 JAN -9 PN 1: 07
SECRETARY OF STATE
TALLAHASSEF FLORIDA



Harriet Smith Windson, Secretary of State

AUTHENTICATION: 1526773

DATE: 12-26-01

3467388 8300

010667928