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CORPORATION(S) NAME

Netversant National, Inc.		1 S 2
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***************************************	75/	
		-
(X) Profit () Nonprofit	() Amendment	() Merger
(X) Foreign	() Dissolution/Withdrawal	() Mark
	() Reinstatement	() Other
() Limited Partnership	() Annual Report	() Other
()LLC	() Name Registration	() Change of RA
() C. 45-1 C.	() Fictitious Name	() UCC S
() Certified Copy	() Photocopies	RA R
() Call When Ready	() Call If Problem	() After 4:30 9 5
(x) Walk In	() Will Wait	(x) Pick Up
() Mail Out		
Name	2/8/02	Order#: 5080243
Availability		0000048969109
Document		-N2/N8/N2U1U6UUU <i>(</i>
Examiner		Ref#: *****70.00 *****70.00
Updater		
Verifier		· · · · · · · · · · · · · · · · · · ·
W.P. Verifier		Amount: \$

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

			TATUTES, THE FOLLOWING IS SUBMITTED ? BUSINESS IN THE STATE OF FLORIDA:	70
1. NetVersant Na				8 7
(Name of corpo	oration; must include the word "INCORPOR	learl	ED", "COMPANY", "CORPORATION" or y indicate that it is a corporation instead of a present.)	EILE STATE
2. Delaware		_ 3.	76-0644454	E 38
(State or count	try under the law of which it is incorporated)	(FEI number, if applicable)	4
4. 05/22/2000		5.	Perpetual	
(Da	te of incorporation)		(Duration: Year corp. will cease to exist or "perpet	ual")
6. 02/01/2002			•	
(Date first trans			transacted business in Florida, insert "upon qualificating, 607.1502 and 817.155, F.S.)	ion.")
7. <u>777 Post Oak I</u>	Blvd. Suite 400, Houston, TX 77056		-	
	(Principal office	add	ress)	
same				
	(Current mailing	add	ress)	
8	and communications cabling infrastructure.			
(Purpose	(s) of corporation authorized in home state of	or co	untry to be carried out in state of Florida)	
9. Name and <u>str</u>	reet address of Florida registered age	nt:	(P.O. Box or Mail Drop Box NOT acceptable)	
Name:	C T Corporation System			
Office Address:	1200 South Pine Island Road			
	Plantation (City)		, Florida <u>33324</u> (Zip code)	1.4.45
ı	(City)		(Zip code)	
Having been nar designated in thi further agree to	is application, I hereby accept the appo	intr tes r	ice of process for the above stated corporation a nent as registered agent and agree to act in this relative to the proper and complete performance of my position as registered agent.	capacity. I
Ву:_	Corporation System (Registered agent	t's si	VICTOR ALFANO ASSISTANT SECRETARY	

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:

Chairman: Address: Vice Chairman: Address: Director: Address: Director: Address: SEE ATTACHMENT
Address: Vice Chairman: Address: Director: Address: Address:
Vice Chairman: Address: Director: Address: Director: Address:
Vice Chairman: Address: Director: Address: Director: Address:
Director: Address: Director: Address:
Director: Address: Director: Address:
Address:
Director: Address:
Director: Address:
Director: Address:
Address:
R OFFICERS SEE ATTACHMENT
R OFFICERS SEE ATTACHMENT
b. Gridate
President: Scott L Fordham
Address: 777 Post Oak Blvd. Suite 400
Houston, TX 77056
Vice President: Ronald E. Hale, Jr.
Address: 777 Post Oak Blvd. Suite 400
Houston, TX 77056
Secretary: William L Fiedler
Address: 777 Post Oak Blvd. Suite 400 Houston, TX 77056
Treasurer: Ronald E. Hale, Jr.
Address: 777 Post Oak Blvd. Suite 400 Houston, TX 77056
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. Michael J. Harwell, Vice President (Typed or printed name and capacity of person signing application)

-5---

Attachment to Florida

Application By Foreign Corporation for Authorization to Transact Business In Florida

Officers & Directors

1. Full Name:

Officer/Director:

Officer's Title:

Business Address:

City: State:

ZIP Code:

2. Full Name:

Officer/Director:

Officer's Title:

Business Address:

City:

State:

ZIP Code:

3. Full Name:

Officer/Director:

Officer's Title:

Business Address:

City:

State:

ZIP Code:

4. Full Name:

Officer/Director:

Officer's Title:

Business Address:

City:

State:

ZIP Code:

William L Fiedler

Officer, Director

Secretary

777 Post Oak Blvd. Suite 400

Houston

ΤX

77056

Scott L Fordham

Officer

President

777 Post Oak Blvd. Suite 400

Houston

TX

77056

Ronald E. Hale, Jr.

Officer

Treasurer and VP

777 Post Oak Blvd. Suite 400

Houston

ΤX

77056

Michael J. Harwell

Officer

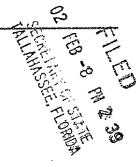
Vice President

777 Post Oak Blvd. Suite 400

Houston

TX

77056



Delaware PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE O DELAWARE, DO HEREBY CERTIFY "NETVERSANT NATIONAL, 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 FIFTH DAY OF FEBRUARY, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1597526

DATE: 02-05-02

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