F020000000734

TRANSMITTAL LETTER

то:	TO: Registration Section Division of Corporations		die			
SUBJ	ECT:	Montech Systems, In		Ffiv)		
		(Name of corporati	on - must include sui	111%)		
Dear S	Sir or Madam:	•				
"Certi	nclosed "Application by ficate of Existence", and sact business in Florida.	check are submitted to	r Authorization to Tr register the above re	ansact Business in Fl ferenced foreign corp	OTALION	
Please return all correspondence concerning this matt			er to the following:	-02/06/ *****70	12N1043no4	
Chesl	ey A. Ellis				·	
		(Name o	f Person)			
Monte	ch Systems, Inc.					
		(Firm/C	ompany)	2000046 -02/06/ ******	0201043005	
945 L	ongdale Ave.			1-1-4-4-4-A	0.(5 *******8.(5	
		(Add	iress)			
Longv	vood, Fl. 32750	·				
		(City/State	and Zip code)	·	T , and	
For fu	irther information concer	rning this matter, please	call:			
Choel	ey A. Ellis	at (407) 797-0335		\$7	
Officer	(Name of Person)	(Area	Code & Daytime Te	elephone Number)	F 02 FEB -1 SECRETAR LLAHKSS	
Regis Divis 409 E	BET ADDRESS: tration Section ion of Corporations . Gaines St.		MAILING ADD Registration Section Division of Corporation 1980, Box 6327	ion orations	FILED -6 PH 4:54 RY OF STATE SEE, FLORID,	
Talia	hassee, FL 32399		Tallahassee, FL	34314	.5 · 47	
Enclo	sed is a check for the fol	llowing amount:				
□ \$7		78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee Certified Copy	\$87.50 Fili Certificate Certified	of Status &	

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. Montech Sys	tems, Inc.					
(Name of cor	poration; must include the word "INCORPO	RATED". "(OMPANY", "CORPOR	ATTON" or		
words or abbr	eviations of like import in language as will o	dearly indica	te that it is a corporation	instead of a		
natural persor	t or partnership if not so contained in the nar	me at present	.)			
2. Colorado		. 0400	50446			
	ry under the law of which it is incorporated)	3. <u>84-08</u>		40 14 \	·	:
(CALC G COCK	y divide the law of watch it is morporately		(FEI number, if	applicable)		
4. October 8, 19		_ 5. "Perp	etual"			
(D	ate of incorporation)	(Dura	tion: Year corp. will cea	se to exist or "pe	rpetual")	
6. "Upon Quali	fication"					
(Date first tran	sacted business in Florida. If corporation ha	s not transac	ted business in Florida, i	nsert "upon qual	ification.")	•
	(SEE SECTIONS 607.	1501, 607.1	502 and 817.155, F.S.)		,	
7, 945 Longdale	Ave., Longwood, Fl. 32750					
	(Principal office	e address)	· · · · · · · · · · · · · · · · · · ·			
945 Lonadale	Ave., Longwood, Fl. 32750					
O TO Longuate	(Current mailing	racklesses)		 	 .	
	(Cuida name	Same	-			
- 11 " 15 .	•					
8. Medical Devic						
(rupis	e(s) of corporation authorized in home state of	or country to	be carried out in state of	'Florida)	7	
9. Name and <u>st</u>	reet address of Florida registered age	nt: (P.O. I	lox or Mail Dron Rox	NOT accentali		20
			on or man Diop Dax			13
Name:	Chesley A. Ellis			-	S	8
Define Address.	Q45 Longdolo Avo				% ₩ ₩	9.
office Addless:	945 Longdale Ave.	<u> </u>	¬.,		<u></u> ō	Hd
	Longwood	1	Florida 32750		S	PELIN
	(City)		(Zip code)			.
	•		(<u>F</u>)		70 E	-
0. Registered	agent's acceptance:					
laving been na	med as registered agent and to accept s	ervice of p	ocess for the above st	ated corporatio	n at the pla	ace
iesignateo in ta.	is application, I hereby accept the appo	intment as	registered agent and a	geree to act in I	this canacit	ty. I
uites agree to luties, and I am	comply with the provisions of all statut familiar with and accept the obligation	ies resalive ne of ma no	to the proper and com	plete performa	nce of my	
	and becept the obligation	из вт шу ро	mion as registered ag	eni,		
	0					
	(11 , 0 911/					
-	mulu/a- uus	<u></u>		<u> </u>		
	Gully a - UK (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: Vern D. Kornelsen	
Address: 4605 Denice Dr.	
Englewood, Co. 80111	
Director: Donald E. Siecke	
Address: 4605 Denice Dr.	
Englewood, Co. 80111	
B. OFFICERS	
President: Chesley A. Ellis President and Chief Executive Officer	
Additional Office Ave	
Languaged El 22750	
Vice President:	
Address:	
Secretary Vern D. Kornelson	
Secretary: Vern D. Komelsen	
Address: 4605 Denice Dr., Englewood, Co. 80111	
Treasurer: Vern D. Kornelsen	_
Address: 4605 Denice Dr., Englewood, Co. 80111	_
NOTE: If pecessary, you may attach an addendum to the application listing additional officers and/or directors.	
13. Cherles G-Ellis fresident C. E-O. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	_
14. Chesley A. Ellis President and C.E.O.	_
(Typed or printed name and capacity of person signing application)	



DEPARTMENT OF STATE CERTIFICATE

I, DONETTA DAVIDSON, Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

MONTECH SYSTEMS, INC. (Colorado CORPORATION) File # 19871451457

was filed in this office on October 8, 1981 and has complied with the applicable provisions of the laws of the State of Colorado and on this date is in good standing and authorized and competent to transact business or to conduct its affairs within this state.

Dated: January 23, 2002

For Validation:

Certificate ID: 531590

To validate this certificate, visit the following web site, enter this certificate ID, then follow the instructions displayed.

www.sos.state.co.us/ValidateCertificate

Donetta Davidson SECRETARY OF STATE