F0200000982

Storecast Merchandising Co	rporation	
		OZ FIB 25 PH 1:42 SECRITARI OF STATE TALLAMASSEE, FLORIDA
		By .
(X) Profit () Nonprofit	() Amendment	() Merger
(X) Foreign	() Dissolution/Withdrawal () Reinstatement	() Mark
() Limited Partnership () LLC	() Annual Report () Name Registration () Fictitious Name	() Mark () Other () Change of RA () UCC () CUS
() Certified Copy	() Photocopies	() CUS
() Call When Ready (x) Walk In () Mail Out	() Call If Problem () Will Wait	() After 4:30 (x) Pick Up
Name Availability Document	2/25/02	Order#: 5046577
Examiner Updater	. <u>.</u> .	-02/25/0201039010 Ref#: *****70.00 *****70.00
Verifier W.P. Verifier		Amount: \$

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

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. Storecast Me	rchandising Corporation	14 See 20	
words or abbr	poration; must include the word "INCORPORA eviations of like import in language as will cleat or partnership if not so contained in the name a	arly indicate that it is a corporation instead of a	
2. New Jersey		3. 22-2049560 円子 里	U
(State or cour	ntry under the law of which it is incorporated)	(FEI number, if applicable)	-
4. 12/09/74		5 Perpetual	>
(D	ate of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	.
6 G	ush fication		
	(SEE SECTIONS 607.150	not transacted business in Florida, insert "upon qualification.") 01, 607.1502 and 817.155, F.S.)	•
7. <u>440 Creamery</u>	Way, Suite 400, Exton, PA 19341		
	(Principal office ad	ldress)	
same			-
	(Current mailing ad	Idress)	
To engage in t	he business of retail merchandising services.		
	e(s) of corporation authorized in home state or c	country to be carried out in state of Florida)	
9. Name and <u>st</u>	reet address of Florida registered agent:	: (P.O. Box or Mail Drop Box NOT acceptable)	
Name:	C T Corporation System		
Office Address:	1200 South Pine Island Road		
	Plantation	Elorido 33324	
	(City)	, Florida 33324(Zip code)	
10 75		(- F)	
10. Kegisterea Havino heen na	agent's acceptance: med as registered agent and to accept som	vice of process for the above stated corporation at the p	
aesignatea in th	is application, I hereby accept the appoint	tment as registered agent and agree to act in this capa	city T
turther agree to	comply with the provisions of all statutes	relative to the proper and complete performance of m	y
uunes, ana 1 am	familiar with and accept the obligations	of my position as registered agent.	
	CT Corporation System	VickiAnn Owens	
By:	(liele) (Dre	Special Assistant Secretary	
	(Registered agent's s	· /	Later many

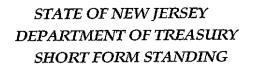
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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

A. DIRECTORS Chairman: Vincent N. Willis Address: 440 Creamery Way, Suite 400 Exton, PA 19341 Vice Chairman: _ Address: Director: Vincent N. Willis Address: 440 Creamery Way, Suite 400 Exton, PA 19341 Director: Howard Willis Address: 440 Creamery Way, Suite 400 Exton, PA 19341 **B. OFFICERS** President: Vincent N. Willis Address: 440 Creamery Way, Suite 400 Exton, PA 19341 Vice President: Howard Willis Address: 440 Creamery Way, Suite 400 Exton, PA 19341 Secretary: Vincent N. Willis Address: 440 Creamery Way, Suite 400 Exton, PA 19341 Treasurer: Howard Willis Address: 440 Creamery Way, Suite 400 Exton, PA 19341 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. Vincent N. Willis, Presidentand Chairman of the Board

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

FL019 - CT Filing Manager Online



STORECAST MERCHANDISING CORPORATION

With the Previous or Alternate Name
STORECAST CORPORATION OF AMERICA (Previous Name)

02 FEB 25 PM 1: 42
SECRETARY OF STATE
AND AHASSEE, FLORIDA

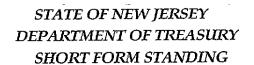
I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on December 9, 1974.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Corporation Trust Company 820 Bear Tavern Road Trenton, NJ 08628

Continued on next page . . .



STORECAST MERCHANDISING CORPORATION

FEB 25

IN TESTIMONY WHEREOF, I have

hereunto set my hand and affixed my Official Seal at Trenton, this 11th day of February, 2002

John E McCormac, CPA State Treasurer

