

FO2000002872

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WATCHFIRE INC.
(Name of corporation - must include suffix)

6/3

Dear Sir or Madam:

FOR CORP

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

MJH

Please return all correspondence concerning this matter to the following: 900005666459--3
-06/04/02--01008--013
*****70.00 *****70.00

ANNIE BERTHELOT
(Name of Person)

WATCHFIRE CORPORATION
(Firm/Company)

1 HINES ROAD
(Address)

KANATA, ON CANADA K2K 3C7
(City/State and Zip code)

For further information concerning this matter, please call:

ANNIE BERTHELOT at (613) 599-3888 x 4006
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

FILED
02 JUN -3 PM 3:33
CLERK OF STATE
TALLAHASSEE, FLORIDA

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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. WATCHFIRE, INC.
(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 3. 04-3518312
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 05/24/2000 5. PERPETUAL
(Date of incorporation) (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 817.155, F.S.))
7. ONE CRANBERRY HILL, LEXINGTON MA 02421
(Principal office address)
1 HINES ROAD, KANATA ON CANADA K2K 3C7
(Current mailing address)
8. SALES & SERVICE OF COMPUTER SOFTWARE
(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: CT Corporation System
Office Address: 1300 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

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02 JUN -3 PM 3:34
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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.

Salvina Amenta-Gray
(Registered agent's signature)

SALVINA AMENTA-GRAY
SPEC. ASST. 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:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: MICHAEL WEIDER

Address: 109 POWELL STREET, OTTAWA ON CANADA K1S 2A2

Vice President: _____

Address: _____

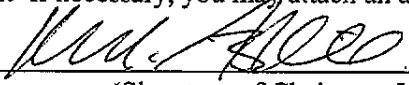
Secretary: KATE MCCARTNEY

Address: 109 POWELL STREET, OTTAWA ON CANADA K1S 2A2

Assistant Treasurer: KENNETH MACASKILL

Address: 3 CECIL WALDEN RIDGE, KANATA ON CANADA K2K 3C6

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

13. 

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

14. KENNETH MACASKILL, ASSISTANT TREASURER

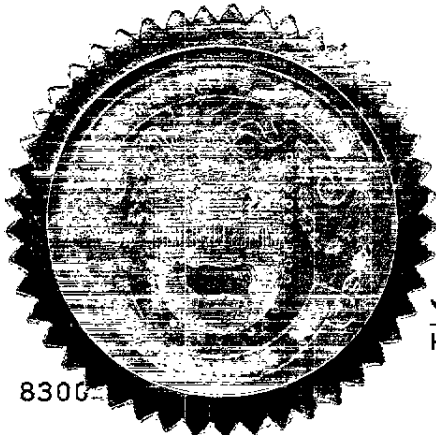
(Typed or printed name and capacity of person signing application)

Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WATCHFIRE, 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 SEVENTH DAY OF MAY, A.D. 2002.



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

3228155 8306

AUTHENTICATION: 1762498

020266797

DATE: 05-07-02