

TO: Registration Section Division of Corporations CapLink Technology, Inc. SUBJECT: (Name of corporation - must include suffix) Dear Sir or Madam: 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. Please return all correspondence concerning this matter to the following: Mary Elizabeth M. Browder, Esq. (Name of Person) Attorney At Law (Firm/Company) 1200 S. Pine Island Road, Suite 220 (Address) -07/31/02--01041--001 Plantation, FL 33324 (City/State and Zip code) 1002-2218-For further information concerning this matter, please call: Mary Elizabeth M. Browder (Area Code & Daytime Telephone Number) (Name of Person) MAILING ADDRESS: STREET ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 409 E. Gaines St. Tallahassee, FL 32399 Tallahassee, FL 32314 Enclosed is a check for the following amount: **XX** \$87.50 Filing Fee, □ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status &

Certified Copy



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 1, 2002

MARY ELIZABETH M. BROWDER, ESQ 1200 S. PINE ISLAND ROAD SUITE 220 PLANTATION, FL 33324

SUBJECT: CAPLINK TECHNOLOGY, INC.

Ref. Number: W02000022187

We have received your document for CAPLINK TECHNOLOGY, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 602A00046295

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	Technology,									
words or abbre	oration; must inclu viations of like im or partnership if no	oort in langua	ge as will clear	ly indicate t	MPANY", "Chat it is a corp	ORPORATI poration inst	ON" or ead of a			
o Delaware	2		3	aŗ	plied fo	r				
(State or countr	y under the law of	which it is in	corporated)		(FEI nu	mber, if app	licable)		_	
July 2,	2002	1 1991	5	Perp	etual					
T(Da	ite of incorporation	1)	 <u>-</u> -	(Duratio	n: Year corp.	will cease to	exist or "p	erpetual")		
6. upon o	qualificatio	n		-						
	sacted business in I		poration has no FIONS 607.150				t "upon qua	lification.") 	 - ,
7. 4801	S. Universit	y Drive,	Suite 131	Davie,	FL 33328	3	=1			
4801	S. Universit		ncipal office ad Suite 131		FL 33328	3		02 AU	-14:8% 	
		(Cur	rent mailing ad	dress)			ASSET -	G-8	7	
0.	of computer					· · · · · · · · · · · · · · · · · · ·	+ '-			p
(Purpose	e(s) of corporation	authorized in	home state or o	country to b	e carried out i	in state of Fig		<u>ত্</u>	17.	
9. Name and <u>s</u> 1	treet address of	Florida reg	istered agent	(P.O. Bo	x or Mail D	rop Box <u>N(</u>	<u>OT</u> ac€epta	ble)		-
Name:	Mary Eliza	beth M.	Browder, E	Esq.		, .	, e.e.			
Office Address:	1200 S. Pi	ne Islan	d Rd Suite	220	· _					
	Plantation	·	·	, Fl	orida <u>333</u> :	24	-	 _		
	(City)				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.

Mary Uzabeth m Bronder (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:

12. Maries an	The property of the property o
A. DIRECTO	ORS CONTROL OF THE CO
Chairman:	David Capone
Address:	4801 S. University Drive, Suite 131
	Davie, FL 33328
Vice Chairman:	Robert Peterson
Address:	4801 S. University Drive, Suite 131
	Davie, FL 33328
Director:	
Address:	
Director:	
	Normal Control of the
	02 LL: 02
B. OFFICER	
President:	David Capone
Address:	4801 S. University Drive, Suite 131
	Davie, FL 33328
Vice President:	Robert Potercon
Address:	4801 S. University Drive, Suite 131
	Davie, FL 33328
Secretary:	David Capone
Address:	4801 S. University Drive, Suite 131 Davie, FL 33328
Treasurer:	Robert Peterson
Address:	4801 S. University Drive, Suite 131 Davie FL 33328

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

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

14. David Capone, President

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

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CAPLINK TECHNOLOGY, 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-FOURTH DAY OF JULY, A.D. 2002.



Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1900976

DATE: 07-24-02

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