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Office Use Only

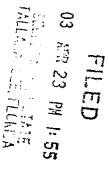


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CT CORPORATION SYSTEM

April 23, 2003

Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399 O3 MR 23 PM 1:56

Re: Order #: 5833460 SO

Customer Reference 1:

Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

New Market Alliance, Inc. (NH) Qualification Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Ashley A Mitchell
Fulfillment Specialist
Ashley_Mitchell@cch-lis.com

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.

I. New Mar	ket Alliance, Inc.			100
words or abbro	poration; must include the word "INCORPORAT eviations of like import in language as will clearl or partnership if not so contained in the name at	y indicate that it is a cor		Sally Se
2. New Ham	pshire 3.	02-0439907	· <u>=</u> :	
(State or countr	ry under the law of which it is incorporated)	(FEI nu	mber, if applicable)	
4. Februar	ry 7, 1994	Perpetual	· **	
(Da	ate of incorporation)	(Duration: Year corp.	will cease to exist or	"perpetual")
6. Upon qu	alification			
(Date first trans	sacted business in Florida. If corporation has no (SEE SECTIONS 607.150)			ualification.")
_{7.} 1000 Ma	arket Street, Bldg. 1, Suite 202, Ports (Principal office add	mouth, NH 03801	2.5	
· ·	(Principal office add	ress)		
1000 Ma	arket Street, Bldg. 1, Suite 202, Ports		<u> </u>	
	(Current mailing add	lress)_		
Sales and	marketing			
8. Purnose	marketing. (s) of corporation authorized in home state or co	puntry to be carried out i	n state of Florida)	
9. Name and <u>st</u>	reet address of Florida registered agent:	(P.O. Box or Mail Dr	op Box <u>NOT</u> accept	table)
Name:	CT Corporation		190' 1 <u>******</u>	
Office Address:	1200 South Pine Island Road	<u>.</u>	u vote £≢	
	Plantation	Florida 33324	=	
	(City)	Zip	code)	, .
Having been na designated in thi further agree to	agent's acceptance: med as registered agent and to accept servi is application, I hereby accept the appoint comply with the provisions of all statutes t familiar with and accept the obligations o	ment as registered age relative to the proper o	ent and agree to act and complete perfor	in this capacity.

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.

(Registered agent's signature)

12. Names and business addresses of officers and/or	directors:			- 3 -2,62 ≠				
A. DIRECTORS								
Chairman: Jim Oliviero		<u> </u>	=					
Address: 235 West Road, Suite #9, Portsmouth,					V 1			
Andrews.			-13		湯かる			
Vice Chairman:	 ·		=	 -	· · · · · · · · · · · · · · · · · · ·			
Address:					 `			
lim Oliviara			<u>=</u>					
Director: Jim Oliviero	*		a <u>.</u>		·			
Address: 235 West Road, Suite #9, Portsmouth,	NH 03801			<u>**</u>				
		· -	<u></u>					
Director:			.=- -==					
Address:		·		·				
		<u> </u>	<u> </u>					
B. OFFICERS	-							
President: Jim Oliviero			. 5 2					
Address: 235 West Road, Suite #9, Portsmouth,	<u> </u>			_ 	. 9			
				- 				
line Officiales					<u> </u>			
Vice President: Jim Oliviero	·—							
Address: 235 West Road, Suite #9, Portsmouth	i, NH <u>038</u> 01			· · · · ·				
		_ 	. <u>;</u>	_ -				
Secretary: Thomas M. Keane	<u>. </u>		<u> </u>					
Address: 1000 Market Street, Bldg. 1, Suite 202	, Portsmouth,	NH 03801 _	<u> </u>					
Treasurer: Jim Oliviero			. 'ate'	, <i>.</i>	<u> </u>			
Address: 235 West Road, Suite #9, Portsmouth,	, NH 03 <u>8</u> 01			est j	- <u>-</u> ·			
7,44,655								
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.								
13. Thelek			<u>ــنو</u> <u>قبد</u>		·			
(Signature of Chairman, Vice Chairman,	, or any officer lis	ted in number 12	of the ap	pplication)	·			
Thomas M. Keane, Secretary		<u> </u>						
(Typed or printed name and capa	acity of person sig	gning application)					

State of New Hampshire Department of State



CERTIFICATE OF EXISTENCE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify NEW MARKET ALLIANCE, INC. is a New Hampshire corporation duly incorporated under the laws of the State of New Hampshire on February 7, 1994. I further certify that all fees and annual reports required by the Secretary of State's office have been received and that articles of dissolution have not been filed.

TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 31st day of March, A.D. 2003

William M. Dal

William M. Gardner
__ Secretary of State

