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TRANSMITTAL LETTER

Division of Corporations				
SUBJECT: Professional Consultin	a Network, Inc.			
(Name of corporation	n - must include suffix)			
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to r to transact business in Florida.	Authorization to Transact Business in Florida", egister the above referenced foreign corporation			
Please return all correspondence concerning this matter	to the following:			
Robert B. Torbensen (Name of Person)				
Professional Consulting Network, Inc.				
595 Market St., Ste. 8	50			
San Francisco, CA 9410				
(City/State a	and Zip code)			
For further information concerning this matter, please of	all:			
Robert B. Torbensen at (415	§20-6341 <u>ω</u>			
(Name of Person) (Area Code & Daytime Telephone Number)				
	MANUAL DEPOS			
STREET ADDRESS: Registration Section	MAILING ADDRESS: Registration Section			
Division of Corporations	Division of Corporations			
409 E. Gaines St. Tallahassee, FL 32399	P.O. Box 6327 Tallahassee, FL 32314			
Enclosed is a check for the following amount:				
☐ \$70.00 Filing Fee \$\square\$ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & S87.50 Filing Fee, Certified Copy 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. Professional Consulting Network 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. <u>Delaware</u> 3. <u>52-2165869</u>		
2. Delaware 3. 52-2165869 (State or country under the law of which it is incorporated) (FEI number, if applicable)		
4. 4-27-1999 5 perpetua (Duration: Year corp. will cease to exist or "perpetual")		
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")		
6 Upon avalification		
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. 595 Market St., Ste. 850. San Francisco, CA 94105 (Principal office address)		
(Principal office address)		
595 Market St., Ste. 850. San Francisco, CA 94105 (Current mailing address)		
(Current mailing address)		
8. For profit, Information Technology Staffing firm. (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)		
(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: Business Filings Incorporated ES = □		
Name: Business Filings I nearporated Office Address: 1000 West Avenue, Suite 1114		
Miami Beach, Florida 33139		
(City) (Zip 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.

Mark Schild AVP Business Filings Incorporated

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. DIREC	CTORS	
CEO	Peter Jozwik	
Address:	595 Market St., Ste. 850	
_	San Francisco, CA 94105	
Secreta	7. Brooks Hoehn	
Address:	595 Market St., Ste. 850	
	San Francisco, CA 94105	
farther Director	Heinz Bartesch	
Address:	595 Market St., Ste. 850	
	San Francisco, CA 94105	
Parther	Greg Krueger	<u> </u>
Address:	380 Interlocken Crescent, Ste. 760	
_	Broomfield, CO 80021	ුපු සි
B. OFFIC	,	FB F T
CEO	Peter Jozwik	8- N -8
Address:	595 Market St., Ste. 850	## B B
Address	San Francisco, CA 94105	
Partner Wice Preside	11.1. R.+	
Address:	595 Market St., Ste. 850	
	San Francisco, CA 94105	. 229
Secretary:	Brooks Hoehn	
Address:	595 Market St. Ste. 850. San Franci	sco, CA 94105
Partner Traceurari	Greg Krueger	
Address:	380 Interlocken Crescent, Ste. 760 Broomfield	CO 80021
Address		
NOTE: If	necessary, you may attach an addendum to the application listing additional office	rs and/or directors.
13.	1) 5/16	
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of	the application)
14	(Typed or printed name and capacity of person signing application)	

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PROFESSIONAL CONSULTING NETWORK, 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 SECOND DAY OF MAY, A.D. 2003.

O3 MAY -8 AM II: 3



Varriet Smith Hindson Secretary of State

AUTHENTICATION: 2396579

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