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TRANSMITTAL LETTER

	ivision of Cor						
SUBJEC	CT: <u>É</u>	FILE SOLUTION (Name of corp.)	US,	, INC-	·		_
		(Name of corp	oration	- must include suffix)			
Dear Sir o	or Madam:						
"Certifica		on by Foreign Corporatioe, and check are submitted lorida.					
Please ret	urn all corresp	ondence concerning this r	matter	to the following:			
P	ONALD F	P. HEIL (Nai					_
		(Na	me of I	Person)			9
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B	ATON 1	ROUGE, LA	708	509		2/55); - 2.5 - 2.5
		(City/S	State ar	nd Zip code)		55	
For further	er information	concerning this matter, pl	lease ca	all:			
BIL	LRICH Name of Person	$\frac{1}{2}$ at $\frac{2}{2}$	25 Area C	293-776	one Number)	-	
· ·		-, .	津		,		
Registration of the August 199 E. Ga	ADDRESS: on Section of Corporation tines St. ee, FL 32399	s	,	MAILING ADDRESS Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	ns		
Enclosed	is a check for	the following amount:			/		•
5 \$70.00	Filing Fee	□ \$78.75 Filing Fee & Certificate of Status		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Certificate of Certified Co	of Statu	ıs &



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 13, 2003

DONALD P. HEIL EFILE SOLUTIONS, INC. 11325 PENNYWOOD AVE BATON ROUGE, LA 70809

SUBJECT: EFILE SOLUTIONS, INC.

Ref. Number: W03000013704

We have received your document for EFILE SOLUTIONS, INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6913.

Letter Number: 903A00029442

Diane Cushing Corporate Specialist

Division of Corporations - P.O. ROX 6327 Tallahassae Florida 3231

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. EFILE SOLUTIONS, 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. 72-1490074 (FEI number, if applicable)
4. SZ6 00 5. PEPETVAL (Date of incorporation) 5. (Duration: Year corp. will cease to exist or "perpetual")
6. (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. 11325 PENNYWOOD AVE. BATTON RIVER, LA \$88.99
POBOX 87010, BATOW ROUGE, LA 7087937
8. GOFTWARE DEVELOPATION, SALES & SUPPORT NO SERVICE (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: 1200 South Fine Island Road Plantation Florida 33324 (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. 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.

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.

Denise Bell
Assistant Secretary

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

A. DIREC	CTORS *		
Chairman:	JACK S. ROME, JR.		•
Address: _	P.O. Box 87010		
	BATON ROUGE, LA 70896		
Vice Chairn	nan:		
Address: _			
_			
Director: _	J. KENNETH PITTS		· ,
Address: _	108 WESTERLY COURT		
_	NASHVILLE, TN 37221		
	J. KING WOOLF		DV.S
	7543 RIENZI BLUD.	3 	SOS
	BATON ROUKE, LA 70809	<u> </u>	95-
B. OFFIC	·	PM	15 July 15 Jul
	J. KWG WOOLF	Ϋ́	NTS.
		<u>ඩ</u>	gr
	7543 RIEWZI BLUB.		-5
	PATON ROUGE, 4 70869		
Vice Presid	lent:		.
Address: _	-		
_			·
	TREASURER: DONALD P. HEIL		
Address: _	3642 HARRIS DR. BATON ROUGE, LA 70816	,	
Treasurer:	<u> </u>		
Address: _			·
NOTE: 4	fuecessary, you may attach an addendum to the application listing additional officers and/or di	rectors	
	to all of The	1001015	•
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the applica	ation)	
14	110 111 6 10.		
	(Typed or printed name and capacity of person signing application)		-

Delaware

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EFILESOLUTIONS, 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 THIRTEENTH DAY OF JUNE, A.D. 2003.



Warriet Smith Hindson
Harriet Smith Windson, Secretary of State

3259906 8300

AUTHENTICATION: 2471099