Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Pax Number

: (850)205-0383

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 : (850)222-1092 Phone

Fax Number

: (850)222-9428

FOREIGN PROFIT QUALIFICATION

Orlando Holdings Corp.

| Certificate of Status | 0 | |
|-----------------------|---------|--|
| Certified Copy | 0 | |
| Page Count | 04 | |
| Estimated Charge | \$70.00 | |

RYISION OF CORPORATION

APPLICATION BY FOREIGN CORPORATION SYSTEM 850 222 7615 P.02/04 JUL-28-2003 14:40 **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. | | loldings Corp. | | |
|------------|-------------------|---|------------|---|
| - | words or abbre | oration; must include the word "INCORPOR viations of like import in language as will club partnership if not so contained in the name | :azlı | ED", "COMPANY", "CORPORATION" or y indicate that it is a corporation instead of a present.) |
| 2. | Delaware | | 3. | 27-0051119 |
| | (State or country | under the law of which it is incorporated) | • | (FEI number, if applicable) |
| d | 03/17/20 | 003 | 5. | Perpetual |
| •• | (Da) | te of incorporation) | | (Duration: Year corp. will cease to exist or "perpetual") |
| 6 | Upon Qu | alification | | · · · · · · · · · · · · · · · · · · · |
| | (Date first trans | acted business in Florida. If corporation has (SEE SECTIONS 607.1 | not 501 | transacted business in Florida, insert "upon qualification."), 607.1502 and 817.155, F.S.) |
| 7 | 2699 Lee | e Road, Winter Park, Florida 3278 | 9 | |
| • | | (Principal office | addi | ress) |
| | c/o Manu | Bettegowda: Metro Center, One | St | ation Place, Stamford Connecticut 06902 |
| | | (Current mailing | addı | ress) |
| 8. | Restauran | t | | |
| -, | (Furpose | (s) of corporation authorized in home state o | I CO | untry to be carried out in state of Florida) |
| 9. | Name and st | reet address of Florida registered ages | at: | (P.O. Box or Mail Drop Box NOT acceptable) |
| | Name: | CT Corporation | | <u> </u> |
| Q f | ffice Address: | 1200 South Pine Island Road, | | |
| | | Plantation, | | , Plorida 33324 |
| | | (City) | *** | (Zip code) |
| 10 | . Registered : | gent'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.

| - Coming Borger | SPECIAL ASSISTANT SECRETAL | | | | | |
|--------------------------------|----------------------------|--|--|--|--|--|
| (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:

| A, DIRE | ECTORS | | |
|------------|--|-------------|-------------|
| Chairman | | | <u></u> |
| Address: | | | |
| - | | | |
| Vice Chai | rman: | | |
| Address: | | | |
| • | | | |
| Director: | Paul Rubin | | |
| Address: | Nation Control Con Station Bloom Chamford Conscious 05000 | | |
| | | | |
| Director: | Manu Bettegowda | | |
| Address: | Metro Center, One Station Place, Stamford Connecticut 06902 | | |
| | | | |
| B. OFFI | CEDS | | |
| | Double Dubin | | |
| | Metro Center, One Station Place | | |
| Address: | Stamford Connecticut 06902 | <u> </u> | |
| - | | 714 | |
| Vice Presi | dent: Manu Bettegowda | | |
| Address: | | <u> </u> | |
| • | Stamford Connecticut 06902 | · | |
| Secretary: | (Assistant) Paul Rubin and Manu Bettegowda | | |
| Address: _ | Metro Center, One Station Place, Stamford Connecticut 06902 | | |
| Treasurer: | | | · |
| Address: | | | |
| NOTE: 1 | f necessary, you may attach an addendum to the application listing additional officers and/or dire | | |
| \$.e | (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the applications Rotten and Mine Provider to the applications of the specific and the second a | on) | <u> </u> |
| 14 | Typed or printed name and Assistant Secretary | | |
| | (Typed or printed name and capacity of person signing application) | | |

850 222 7615 P.04/04

The First State

I, HARRINT SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAMARE, DO HEREEY CENTIFY "ORLANDO HOLDINGS CORP." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAMARE AND IS IN COOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF JULY, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHIEE TAXES HAVE NOT BEEN ASSESSED TO DATE.

3635806 8300

030476589

Warriet Smith Hindson

AUTHENTICATION: 2539450

DATE: 07-21-03

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