

**F03000004144**

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H03000256088 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

03 AUG 18 PM 1:13  
RECEIVED  
FAX UNIT  
DIVISION OF CORPORATIONS  
STATE OF FLORIDA  
TALLAHASSEE

To:  
Division of Corporations  
Fax Number : (850)205-0383

From:  
Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (950)222-1092  
Fax Number : (850)222-9428

RECEIVED  
03 AUG 18 PM 1:23  
Please keep original filing date of 8/18/03  
DIVISION OF CORPORATIONS

**FOREIGN PROFIT QUALIFICATION**

CML Emergency Services, Inc.

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

DB  
8-19-03



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

August 19, 2003

CT CORPORATION SYSTEM

SUBJECT: CML EMERGENCY SERVICES, INC.  
REF: W03000023566

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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) 245-6025.

Trevor Brumbley  
Document Specialist

FAX Aud. #: H03000256088  
Letter Number: 303A00046967

03 AUG 18 PM 1:13  
FILED

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. CML EMERGENCY SERVICES, 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 (State or country under the law of which it is incorporated) 3. 74-2933998 (FEI number, if applicable)

4. SEPTEMBER 27, 1999 (Date of incorporation) 5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")

6. YET TO TRANSACT BUSINESS IN FLORIDA (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, P.S.)

7. 75 BLVD. DE LA TECHNOLOGIE GATINEAU, QUEBEC J8Z 3G4 CANADA (Current mailing address)

8. HARDWARE & SOFTWARE SALES & SUPPORT FOR 911 CALL MANAGEMENT. (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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation Florida, 33324 (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.

C T Corporation System CONNIE BRYAN SPECIAL ASSISTANT SECRETARY (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 addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

FLS19 - 02/99 CT System LINKS

03 AUG 18 PM 19 1 AND FILED

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: JEFF ROBERTSON

Address: 75 BLVD. DE LA TECHNOLOGIE

GATINEAU, QUEBEC J8Z 3G4 CANADA

Director: DAVID JEFFREY

Address: 75 BLVD. DE LA TECHNOLOGIE

GATINEAU, QUEBEC J8Z 3G4 CANADA

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: JEFF ROBERTSON

Address: 75 BVD. DE LA TECHNOLOGIE

GATINEAU, QUEBEC J8Z 3G4 CANADA

Vice President: DOUG ROBERTS

Address: 75 BLVD. DE LA TECHNOLOGIE

GATINEAU, QUEBEC J8Z 3G4 CANADA

Secretary: DAVID JEFFREY

Address: 75 BLVD DE LA TECHNOLOGIE

GATINEAU, QUEBEC J8Z 3G4 CANADA

Treasurer: DAVID JEFFREY

Address: 75 BLVD. DE LA TECHNOLOGIE

GATINEAU, QUEBEC J8Z 3G4 CANADA

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

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

14. DAVID JEFFREY, C.F.O., SECRETARY  
(Typed or printed name and capacity of person signing application)

03 AUG 19 PM 1:13  
FILED

# Delaware

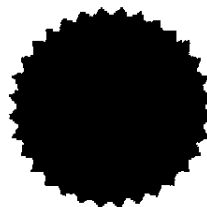
PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CML EMERGENCY SERVICES, 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 EIGHTEENTH DAY OF AUGUST, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 2588149

DATE: 08-18-03

3102440 6300

030537104