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The Mark of the State of the St (City, State, Zip) (Phone #) OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

(Corporation Name)	(Document #)
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NEW FILINGS	AMENDMENTS
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Profit Profit	Amendment
Profit	Amendment
Profit NonProfit	Amendment Resignation of R.A., Officer/Director

OTHER FILNGS		
	Annual Report	
	Fictitious Name	
	Name Reservation	

REGISTRATION/ QUALIFICATION			
Foreign			
Limited Partnership			
Reinstatement			
Trademark			
Other			

Examiner's Initials

CR2E031(9/92)



November 5, 2003

INVENTORY INNOVATIONS, INC. 12020 LEEWARD WALK CIRCLE ALPHARETTA, GA 30005

SUBJECT: INVENTORY INNOVATIONS, INC.

Ref. Number: W03000032679

We have received your document for INVENTORY INNOVATIONS, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$70.00.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Letter Number: 103A00060367

Joey Bryan Document Specialist The Marions of the State of the

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. Inventory Innovations, Incornorated						
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"						
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	$\langle \rangle$					
	`<					
Inventory Apress	ø					
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	ڼ					
2. Georgia 3. 58 225 7304 Config	ريا					
2. State or country under the law of which it is incorporated) (FEI number, if applicable)	T					
4. 10/1996 (Date of incorporation) 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")						
1 (Battleton, 1 can borp, with beautiful perpendictly)						
6. Upon qualitication						
(Date first transacted dusiness 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. 245 East Drive Juite 105 W. Melbourne, FL32904						
(Principal office address)						
12020 Leeward Walk Circle Alpharetta, GA 30005						
(Current mailing address)						
Para la						
8. Kelocating halpdesk to Florida (Purpose(s) of conforation authorized in home state or country to be carried out in state of Florida)						
(Purpose(s) or corporation authorized in notice state or country to be carried out in state of rionda)						
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)						
Name: Sheila Staples	-					
Office Address: 245 East Prive Suite 105						
W. Melbourne, Florida 32904						
(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.

(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. DIRECTORS

Chairman:	<u>and the second of the second </u>	<u> </u>
Address: _		
-		
, .		
Vice Chair	man:	چ <u>ند تر در در</u>
Address: _		12 13
		25 0 1
		En or
Director: _	The second secon	- 1
Address: _	the state of the s	500 0
_		75
Director: _		<u> </u>
Address: _		
- · · -		
B. OFFI	CERS	
President:	John Worrell	<u> </u>
Address: _	12020 Leeward Walt Circle	
-	Alpharetta, GA 30005	*
Vice Presid	lent:	3-2-
Address:		<u></u>
_		
-	· · · · · · · · · · · · · · · · · · ·	
Secretary:	Maggie Warrell	
Address: _	12020 Leeward Walk Circle Alphoretta,	GA 30005
Treasurer:		
Address:	the second secon	<u> </u>
NOTE: I	f necessary, you may attach an addendum to the application listing additional officers a	and/or directors.
	\sim 1 (1)	
13	(Signature of Director or Officer listed in number 12 of the application)	
	Manager 1	
14	(Typed or printed name and capacity of person signing application)	\$ and

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER : K627052
DATE INC/AUTH/FILED: 08/30/1996
JURISDICTION : GEORGIA
PRINT DATE : 10/29/2003

FORM NUMBER : 211

INVENTORY INNOVATIONS
MAGGIE WORRELL
12020 LEEWARD WALK CIRCLE
ALPHARETTA, GA 30005



CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of the above print date

inventöry innovätions/inc. A Georgia profit corporation

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official code of Georgia Annorated.

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above take and has not filed articles of dissolution, certificate of cancellation or any other similar document with the Office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the print date above. It does not certify whether or not a notice of intent to dissolve an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This information is electronically transmitted, issued and certified in accordance with the Georgia Brectronic Records and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

20031029150108583



Cathy Cox Secretary of State