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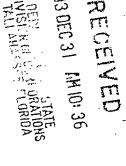
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CORPORATE ACCESS,	236 East 6th	Avenue . Tallahassee, Florida 32303	3		
INC. P.O.	. Box 37066 (32315-7066)	~ (850) 222-2666 or (800) 969-1	1666 . Fax (850) 222-1666		
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## APPLICATION BY FOREIGN CORPORATION 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.

(Enter name of corporation; must include "INCORPO	10 LOGISTICS, INCAM W
(Enter name of corporation; must include "INCORPO	ORATED," "COMPANY," "CORPORATION," S
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	
	1
	The second of th
(If name unavailable in Florida, enter alternate corpo	orate name adopted for the purpose of transacting business in Florida)
· Days	77.200711
2. DELAWARE (State or country under the law of which it is incorporate)	rated) (FEI number, if applicable)
(State of country under the law of which it is incorpor	rated) (FEI number, it applicable)
4. JAN. 6, 1995	5. PERPETUAL
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
( 11 And D. 1130310	To A
6. Oate first transacted business in Florida. If comparation	ion has not transacted business in Florida, insert "upon qualification.")
	6 607.1501, 607.1502 and 817.155, F.S.)
_	· • • • • • • • • • • • • • • • • • • •
7. 3721 VENTURA DRIVI	office address)
ARLINGTON HOIGHTS. I	-L- (20004
(Current m	uailing address)
	_
8. SYSTEMS INTEGE	RATION
(Purpose(s) of corporation authorized in home	state or country to be carried out in state of Florida)
0.31	
9. Name and street address of Florida registered	d agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: Laterines Done nick	, DOSTER, KANTOR + REED. P.A.
Office Address: 215 NoRTH EOL	A DRIVE
	, Florida 3280 (Zip code)
- UKLANDO	, Florida 3280
(City)	(Zip code)
10. Registered agent's acceptance:	
	cept 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 s	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.
10.11 1	
( V. Mel - //)	

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.

ANDREW L. CHAPIN, Esquire

(Registered agent' signature)

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

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D927/1		
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mber 12 of the app	lication)	<u> </u>
	oplication listing admber 12 of the app	60004.

## Delaware

## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WITRON INTEGRATED LOGISTICS, 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 TWENTY-SECOND DAY OF DECEMBER, A.D. 2003.



Harriet Smith Windsor, Secretary of State

2461088 8300

AUTHENTICATION: 2831954