

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.

((H04000024805 3)))

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

To:

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

From:

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

FOREIGN PROFIT QUALIFICATION

Agilisys, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing

Public Access Help

RECEIVED
04 FEB -4 AM 8:13
DIVISION OF CORPORATION

04 FEB -4 PM 2:55
SECRETARY OF STATE
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED

APPROVED
AND
FILED

2474

**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. Agilisys, 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. 30-0074217
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 05/01/2002 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon Filing
(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. One Country View Road, Malvern, PA 19355
(Principal office address)
same
(Current mailing address)
8. Development, marketing, sales and implementation of software solutions
(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/o C T Corporation System
Office Address: 1200 South Pine 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. 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
By: Tina Perrin Tina Perrin
(Registered agent's signature) Special Assistant Secretary

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.

APPROVED
AND
FILED
04 FEB - 4 PM 2007
SECRETARY
ALAHAM

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

A. DIRECTORS

Chairman: C. James Schaper

Address: One Country View Road

Malvern, PA 19355

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

SEE ATTACHMENT

President: C. James Schaper

Address: One Country View Road

Malvern, PA 19355

Vice President: _____

Address: _____

Secretary: Gregory M. Giangjordano

Address: One Country View Road Malvern, PA 19355

Treasurer: Russell Fleischer

Address: One Country View Road Malvern, PA 19355

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

13. _____

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

14. Gregory Giangjordano, Secretary

(Typed or printed name and capacity of person signing application)

SECRET
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 08-01-2001 BY 60321

04 FEB -4 PM 2:55

APPROVED
AND
FILED

Attachment to Florida

Officers & Directors

-
- | | | |
|----|-------------------|-------------------------|
| 1. | Full Name: | C. James Schaper |
| | Officer/Director: | Officer, Director |
| | Officer's Title: | President |
| | Director's Title: | Chairman |
| | Business Address: | One Country View Road |
| | City: | Malvern |
| | State: | PA |
| | ZIP Code: | 19355 |
| 2. | Full Name: | Gregory M. Giangiardano |
| | Officer/Director: | Officer |
| | Officer's Title: | Secretary |
| | Business Address: | One Country View Road |
| | City: | Malvern |
| | State: | PA |
| | ZIP Code: | 19355 |
| 3. | Full Name: | Russell Fleischer |
| | Officer/Director: | Officer |
| | Officer's Title: | Treasurer |
| | Business Address: | One Country View Road |
| | City: | Malvern |
| | State: | PA |
| | ZIP Code: | 19355 |

APPROVED
AND
FILED
04 FEB -4 PM 2:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delaware

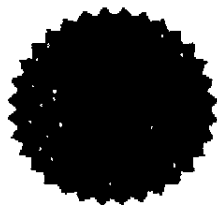
PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AGILISYS, 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-THIRD DAY OF JANUARY, A.D. 2004.

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

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



3520846 8300

040048778

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 2887273

DATE: 01-23-04