

F04600001088

Florida Department of State
Division of Corporations
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Division of Corporations
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From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
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FOREIGN PROFIT QUALIFICATION

Convention Management, Inc.

Certificate of Status	0
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F04-1088
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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.

1. CONVENTION MANAGEMENT, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DELAWARE 3. 45-0524440
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 28 FEBRUARY 2003 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION
(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. 1700 RIO GRANDE AUSTIN TX 78701
(Principal office address)
(SAME)
(Current mailing address)

8. GENERAL CONSTRUCTION
(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: CT CORPORATION SYSTEM

Office Address: 1200 S. PINE ISLAND RD.

PLANTATION

(City)

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.

KIRK HOOD
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 business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: CONSTANCE D. COLEMAN

Address: 93 RED RIVER

AUSTIN TX 78701

Director: _____

Address: _____

B. OFFICERS

President: MARK KENT

Address: 93 RED RIVER

AUSTIN TX 78701

Vice President: STEVE JORDAN

Address: 93 RED RIVER

AUSTIN TX 78701

Secretary: MICKIE SMITH

Address: 1700 RIO GRANDE AUSTIN TX 78701

Treasurer: _____

Address: _____

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

13. Constance D. Coleman
(Signature of Director or Officer listed in number 12 of the application)

14. Constance D. Coleman
(Typed or printed name and capacity of person signing application)

04 FEB 25 AM 10:32
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Delaware

PAGE 1

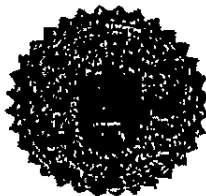
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CONVENTION MANAGEMENT, 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-FOURTH DAY OF FEBRUARY, A.D. 2004.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



3624683 8300

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Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 2950045

DATE: 02-24-04