FUY000002130

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| |
| |
| |

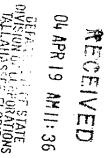




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SECRETARY OF STATE

MM





ACCOUNT NO. : 072100000032

REFERENCE : 573969

4332362

AUTHORIZATION :

COST LIMIT : \$ 70.00

ORDER DATE: April 16, 2004

ORDER TIME : 9:54 AM

ORDER NO. : 573969-005

CUSTOMER NO: 4332362

CUSTOMER: Solomon Johnson, Paralegal

Brownstein Hyatt & Farber,

19th Floor

410 17th Street Denver, CO 80202

FOREIGN FILINGS

NAME: WELLBRIDGE LICENSING, INC.

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
X PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 2956

EXAMINER:

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| IN | COMPLIANO | CE WITH SECTION 607.1503, FLORIDA | STATUTES, THE FOLLOWING IS SUBMERTED TO BUSINESS IN THE STATE OF FLORIDATES, "COMPANY," "CORPORATION," | ١. |
|------|---------------------------------|---|--|-----------|
| RE | GISTER A FO | OREIGN CORPORATION TO TRANSACT | BUSINESS IN THE STATE OF FLORIDA 🥱 🥻 🥻 | |
| 1. | WELLBRIDGE | LICENSING, INC. Corporation; must include "INCORPORATEI | " "COMPANY" "COPPORATION" | |
| | | Corp.," "Inc.," "Co.," or "Corp.") | o, Company, Corporation, | - |
| | | • | | 5 |
| | | | | ,,, |
| | (If name unava | ilable in Florida, enter alternate corporate nam | e adopted for the purpose of transacting business in Florida) | |
| | COLORADO | 3 | · · · · · · · · · · · · · · · · · · · | |
| (| State or countr | y under the law of which it is incorporated) | (FEI number, if applicable) | |
| 4. | February 5 | 5, 1999 5 | Perpetual | |
| | (Da | te of incorporation) | (Duration: Year corp. will cease to exist or "perpetual") | · |
| | UPON QUALI | | | |
| (| Date first trans | | ot transacted business in Florida, insert "upon qualification.") 11, 607.1502 and 817.155, F.S.) | |
| 7. Þ | Vellbridge | Licensing, Inc., 1700 Broadway, | Suite 1900, Denver, Colorado 80290 | |
| | | (Principal office ad | | |
| _ | 1700 Broad | way, Suite 1900, Denver, Colorad | do 80290 | |
| | | (Current mailing ad | dress) | |
| | | | | |
| 8. | The transa | ction of all lawful business of | a corporation, as permitted by law | - ± |
| | (Purpose | (s) of corporation authorized in home state or o | country to be carried out in state of Florida) | |
| 9. | Name and <u>st</u> | reet address of Florida registered agent: | (P.O. Box or Mail Drop Box NOT acceptable) | |
| | Name: | Corporation Service Company | en e | |
| Off | ice Address: | 1201 Hays Street | | :- |
| | | Tallahassee | Elevide annon | |
| | | (City) | , Florida <u>32301</u> (Zip code) | |
| | | (0.1,) | (Lip code) | |
| | | agent's acceptance: | | |
| Ha: | ving been nai ionated in thi | ned as registered agent and to accept serv is application. I hereby accept the appoint | vice of process for the above stated corporation at the place iment as registered agent and agree to act in this capacity. I | |
| furi | ther agree to | comply with the provisions of all statutes | mem as registerea agem and agree to act in this capacity. The relative to the proper and complete performance of my duties | 5. |
| ana | l I am familia | r with and accept the obligations of my po | osition as registered agent. | , |
| | | Corporation Service Company | | |
| | | | | |
| | _ | (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:

| arman Eddie D. Williams - Sole Director | Υ | |
|--|--|---|
| • | r | |
| dress: 1700 Broadway, Suite 1900, Denver, | , Colorado 80290 | |
| | | |
| e Chairman: | | |
| dress: | | |
| | | , |
| | | |
| ector: | - | |
| lress: | | |
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| ector. | | _ |
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| | | |
| OFFICERS | | |
| diame mada m wallana manadana | 2.5 | |
| | Secretary and Treasurer | |
| lress: 1700 Broadway, Suite 1900, Denver, | Colorado 80290 | · |
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| President: | | |
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| ress: ress: | | |
| ress: ress: ress: ress: TE: If necessary, you may attach an addendum to the state of the sta | he application listing additional officers and/or directors. | |
| retary: ress: ress: ress: ress: ress: ress: | he application listing additional officers and/or directors. | |
| ress: ress: surer: ress: TE: If necessary, you may attach an addendum to the state of the st | he application listing additional officers and/or directors. | |



DEPARTMENT OF STATE CERTIFICATE

I, DONETTA DAVIDSON, Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

WELLBRIDGE LICENSING, INC. (Colorado CORPORATION)
File # 19991022637

was filed in this office on February 5, 1999 and has complied with the applicable provisions of the laws of the State of Colorado and on this date is in good standing and authorized and competent to transact business or to conduct its affairs within this state.

Dated: April 9, 2004

For Validation:

Certificate ID: 785314

To validate this certificate, visit the following web site, enter this certificate ID, then follow the instructions displayed.

www.sos.state.co.us/ValidateCertificate

Nonetta Davidson SECRETARY OF STATE