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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : CORPORATE & CRIMINAL RESEARCH SERVICES
Account Number : 110450000714
Phone : (850) 222-1173
Fax Number : (850) 224-1640

0672.26083**RECEIVED****04 MAY -7 PM 3:48****DIVISION OF CORPORATION****FOREIGN PROFIT QUALIFICATION****SKYWAY SOFTWARE, INC.**

Certificate of Status	0
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Page Count	04
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**FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
04 MAY -7 AM 8:34****Electronic Filing Manual****Corporate Filing****Public Access Help**

H04000100927

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. SKYWAY SOFTWARE, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

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

2. GEORGIA

(State or country under the law of which it is incorporated)

3.

(FEI number, if applicable)

4. OCTOBER 11, 2001

(Date of incorporation)

5.

PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. JANUARY 1, 2002

(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. 200 South Hoover Blvd., Bldg. 211, Suite 100, Tampa, FL 33609

(Principal office address)

SAME AS ABOVE

(Current mailing address)

8. All purposes which may be lawfully undertaken by a corporation

(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: P&L CORP.

Office Address: Greenleaf Building, 200 Laura Street

Jacksonville

(City)

, Florida 32202

(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:

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04 MAY - 7 AM '04

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A. DIRECTORS

XEROX Jared C. Rodriguez
 Address: 200 South Hoover Blvd., Bldg. 211, Suite 100, Tampa, FL 33609

BOONSTANBROOK Daniel S. Kagerter
 Address: 200 South Hoover Blvd., Bldg. 211, Suite 100, Tampa, FL 33609

Director: Timothy Mann, Jr.
 Address: 200 South Hoover Blvd., Bldg. 211, Suite 100, Tampa, FL 33609

Director: Stewart Bortron
 Address: 200 South Hoover Blvd., Bldg. 211, Suite 100, Tampa, FL 33609

B. OFFICERS


President: Jared C. Rodriguez
 Address: 200 South Hoover Blvd., Bldg. 211, Suite 100, Tampa, FL 33609

Vice President: Larry Sledge
 Address: 200 South Hoover Blvd., Bldg. 211, Suite 100, Tampa, FL 33609

Secretary:
 Address:

Treasurer:
 Address:

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

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

14. Larry Sledge, Chief Financial Officer
 (Typed or printed name and capacity of person signing application)

 06 MAY -7 AM 8:34
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

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Secretary of State
Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

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DOCKET NUMBER : 041210465
CONTROL NUMBER : 0145584
DATE INC/AUTH/FILED: 10/11/2001
JURISDICTION : GEORGIA
PRINT DATE : 04/30/2004
FORM NUMBER : 211

CORPDIRECT AGENTS, INC.
DAVID HOLCOMB #310
900 OLD ROSWELL LAKES PKWY.
ROSWELL, GA 30076

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

SKYWAY SOFTWARE, INC.
A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated 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 date issued. 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 certificate is issued pursuant to 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.



Cathy Cox

Cathy Cox
Secretary of State
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