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(City/State/Zip/Phone #)

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DIVISION OF CORPORATION

04 MAY 28 AM 9 14

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04 MAY 28 PM 12:22

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BK



CORPORATION SERVICE COMPANY

FILED  
04 MAY 28 PM 12:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ACCOUNT NO. : 072100000032  
REFERENCE : 669319 7184769  
AUTHORIZATION : *Patricia Pizoto*  
COST LIMIT : \$ 70.00

ORDER DATE : May 20, 2004  
ORDER TIME : 9:46 AM  
ORDER NO. : 669319-005  
CUSTOMER NO: 7184769  
CUSTOMER: Laura Lopez  
Fitlinxx, Inc.  
860 Canal Street  
Stamford, CT 06902

FOREIGN FILINGS

NAME: FITLINXX, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea -- EXT# 2914

EXAMINER: \_\_\_\_\_

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.

FILED  
04 MAR 88 PM 12:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. FitLinxx, 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

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

3. 061370158

(FEI number, if applicable)

4. March 27, 1998

(Date of incorporation)

5. Perpetual

(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.)

860 Canal Street

7. Stamford, CT 06902

(Principal office address)

(Current mailing address)

Any lawful purpose. To engage in any act or activity for which corporations

8. may be organized.

(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: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee

(City)

, Florida 32301

(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.*

Corporation Service Company

By: [Signature]

(Registered agent's signature)

Assistant Vice President

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: See attached officers/directors rider

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**B. OFFICERS**

President: See attached officers/directors rider

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_


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. Geoffrey Alswanger, Secretary  
(Typed or printed name and capacity of person signing application)

## **OFFICERS/DIRECTORS RIDER**

FL-Application by Foreign Corporation for Authorization

FitLinxx, Inc.

### **List of Officers**

**Name:** David Crampton  
**Bus. Addr.:** 860 Canal Street, Stamford, CT 06902

**Title:** CEO

**Name:** Geoffrey Alswanger  
**Bus. Addr.:** 860 Canal Street, Stamford, CT 06902

**Title:** CFO/Treasurer/Secretary

### **List of Directors**

**Name:** Arthur S. Appel  
**Bus. Addr.:** 1661 Worcester Road, Suite 303, Framingham, MA 01701

**Term:** Dec 31, 2005

**Name:** Keith E. Camhi  
**Bus. Addr.:** 860 Canal Street, Stamford, CT 06902

**Term:** Dec 31, 2005

**Name:** David M. Coit  
**Bus. Addr.:** Two City Center, 5th Floor, Portland, ME 04101

**Term:** Dec 31, 2005

**Name:** David Crampton  
**Bus. Addr.:** 860 Canal Street, Stamford, CT 06902

**Term:** Dec 31, 2005

**Name:** Edward Fuhrman  
**Bus. Addr.:** 186 Overbrook Drive, Stamford, CT 06906

**Term:** Dec 31, 2005

**Name:** James H. Rice  
**Bus. Addr.:** Two City Center, 5th Floor, Portland, ME 04101

**Term:** Dec 31, 2005

**Name:** John Warburg  
**Bus. Addr.:** 750 Verna Hill Road, Fairfield, CT 06430

**Term:** Dec 31, 2005

# Delaware

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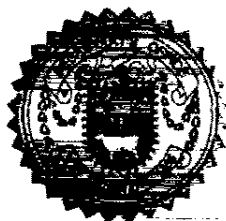
*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FITLINXX, 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 TWENTIETH DAY OF MAY, 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.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FITLINXX, INC." WAS INCORPORATED ON THE TWENTY-SEVENTH DAY OF MARCH, A.D. 1998.



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 3124162

DATE: 05-20-04