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Account Name

: CORPORATION SERVICE COMPANY

Account Number : 120000000195 Phone

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FOREIGN PROFIT QUALIFICATION

TURNKEY TECHNOLOGIES, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
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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. | 1TurnKey Technologies, Inc. | | | | | |
|----|-----------------------------|---|---------------------|--|--------------------|--------|
| | (Enternment of c | orporation; most include "INC orp," "Inc," "Co," or "Corp.") | orporated," " | COMPANY," "CORPORATION," | | |
| | | | TumKey South | 3 | | |
| | (If tame mavail | able in Florida, enter alternate o | orporate name ado | pted for the purpose of transacting business. | ness in Plorida) | |
| 2. | · | New York | 3. | 16-1553282 | | |
| | (State or country | under the law of which it is inc | orporated) | 16-1553282 (FEI number, if applicable |) | |
| 4. | | July 8, 1998 | 5. | Perpetual | | |
| | (Duto | of incorporation) | (E | wration: Year corp. will cease to exist | or "perpetual") | |
| 6. | | | pon filing. | | <u> </u> | |
| | | | | orida, if prior to registration) F.S., to determine penalty liability) | | |
| 7 | T | umKey Technologies, Inc. | Adler Drive Ea | est Syracuse, NY 13057 | | |
| - | | (Prince | ipal office address |) | | |
| | | TurnKey Technologies, Inc. | 5 Adier Drive Ea | ast Syracuse, NY 13057 | _ = | |
| • | | (Curre | nt mailing address |) | | |
| 8. | | High Speed Internet and C | | | AUG 2 | |
| | (Purpose(s) |) of corporation authorized in h | ome state or count | ry to be carried out in state of Florida) | ္ကြီး ယ | |
| 9. | Name and stree | t address of Florida registere | d agent: (P.O. B | ox NOT acceptable) | PH 4: 0 | |
| | Name: | Corporation Service Co | apany | - | | |
| O | Tice Address: | 1201 Hays Street | ·· | _ | | • • |
| | | Tallahassee, : | | Florida 32301 | | |
| | | (City) | | (Zip code) | | |
| | | ent's acceptance: ed as registered agent and to | accept service o | of process for the above stated corpu | ration at the plac | ee |

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)

Dolores Button, Asst. V.P.

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

II. 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.

| A. DIRECTORS | | | | | |
|---|--|--|--|--|--|
| Chairman: Gany A. Togní | | | | | |
| Address: 4270 Orion Path | | | | | |
| Liverpool, NY 13090 | | | | | |
| Vice Chairman: Gany A. Togni | | | | | |
| Address: 4270 Orion Path | | | | | |
| Liverpool, NY 13090 | | | | | |
| Director: Garry A. Togni | | | | | |
| Address: 4270 Orion Path | | | | | |
| Liverpaol, NY 13090 | | | | | |
| Director: Garry A. Togni | | | | | |
| Address: 4270 Orion Path | | | | | |
| Liverpool, NY 13090 | | | | | |
| B. OFFICERS | | | | | |
| President: Garry A. Togni | | | | | |
| Address: 4270 Orion Path | | | | | |
| Liverpool, NY 13090 | | | | | |
| Vice President: Garry A. Togni | | | | | |
| Address: 4270 Orion Path | | | | | |
| Liverpool, NY 13090 | | | | | |
| Secretary: Garry A. Togni | | | | | |
| Address: 4270 Orion Path Liverpool, NY 13090 | | | | | |
| Treasurer: Garry A. Togni | | | | | |
| Address: 4270 Orion Path Liverpool, NY 13090 | | | | | |
| 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. Garry A. Togni | | | | | |

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State of New York Department of State

I hereby certify, that the Certificate of Incorporation of TURNKEY TECHNOLOGIES, INC. was filed on 07/09/1998, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

Witness my hand and the official seal of the Department of State at the City of Albany, this 11th day of October two thousand and two.

Secretary of State

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