# F04000004928

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
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### TRANSMITTAL LETTER

TO:	_	tration Se ion of Co	ction rporations					
SUBJ	ECT:	Network	Systems, In	c.				
БОВО	2011	<del></del>			rporatio	on - must include suffix)	)	
Dear S	ir or M	adam:						
"Certif	icate of		e," and checi			Authorization to Transa register the above refere	nced foreign corpo	oration to
Please	return a	all corres	pondence cor	cerning thi	s mattei	to the following:	W04-	70周
Shann	on Mito	hell						
				(I	Name of	f Person)		
Netwo	rk Syste	ems, Inc.					·	3
				(I	irm/Co	mpany)		છું
867 W	C Hodo	ges Road						56
					(Add	ress)	<del> </del>	
States	boro, G	A 30461						
		<del></del>	<del></del>	(Cit	y/State	and Zip code)	<del></del>	<del></del>
For fur	ther in	formation	concerning t	his matter,	please o	call:		
Shanne	on Mitc	hell		at (_ <sup>9</sup>	912	) 587-2255		
	(Nan	e of Pers	on)			Code & Daytime Teleph	none Number)	_
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399				MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				
Enclos	ed is a	check for	the following	g amount:				
<b>Ø</b> \$70	.00 Fili	ing Fee		Filing Fee d		\$78.75 Filing Fee & Certified Copy	S87.50 Filin Certificate Certified C	of Status &



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 9, 2004

SHANNON MITCHELL NETWORK SYSTEMS, INC. 867 WC HODGES ROAD STATESBORO, GA 30461

SUBJECT: NETWORK SYSTEMS, INC.

Ref. Number: W04000030204

We have received your document for NETWORK SYSTEMS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please note that this adopted name is for use in Florida only, and does not affect your filing in Georgia in any way.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers Document Specialist ov visigit of corporations

Letter Number: 004A00049258

## 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. Network Systems, Inc.				
(Enter name of corporation; must include "INCORPORA" "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	TED,"	"COMPANY," "CORPORATION,"		_
Optical Fiber Systems of Fl (If name unavailable in Florida, enter alternate corporate i			in Florida)	<del>-</del>
g Georgia	3. £	8-2308780		
(State or country under the law of which it is incorporated)	i)	(FEI number, if applicable)		_
4. July 19, 1995	5. 1	Perpetual		_
(Date of incorporation)		Duration: Year corp. will cease to exist or "p	erpetual")	- <del></del>
5. N/A				_
•		Florida, if prior to registration)  2, F.S., to determine penalty liability)		
•	007.150	z, r.s., to determine penalty habitity)		
7. 867 WC Hodges Road, Statesboro, GA 30461 (Principal office	ce addre	(25)		_
867 WC Hodges Road, Statesboro, GA 30461		,		
(Current mailin	ng addre	SS)		-
			9	نزنه
3. Low Voltage Cabling Company				<u> </u>
(Purpose(s) of corporation authorized in home state	e or cou	ntry to be carried out in state of Florida)	35	
P. Name and street address of Florida registered agent:	: (P.O.	Box NOT acceptable)	27	THE COL
Name: Lowell Trent		-	P	ORPI
		<del></del>	$\ddot{\wp}$	XXX STA
Office Address: 4919 Sycamore St.			59	Ç.
Apopka		, Florida 32712		ξ;
(City)		(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.

Shannon M. Mutchell
(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:	
Address:	
Audiess.	
Director	
Director:	
Address:	AUG 2
	270
B. OFFICERS	<b>모</b> 원
President: William Lee	2: 55
Address: 867 WC Hodges Road, Statesboro, GA 30461	o ;
Vice President:	
Address:	
Secretary: Faye Lee	
Address: 867 WC Hodges Road, Statesboro, GA 30461	
Treasurer: Faye Lee	
Address: 867 WC Hodges Road, Statesboro, GA 30461	,
NOTE: If necessary, you may attach an addendum to the application listing additiona	l officers and/or directors.
13. Million Zu	
(Signature of Director or Officer listed in number 12 of the appl	lication)
14 William Lee, President	

(Typed or printed name and capacity of person signing application)

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

CONTROL NUMBER : K524590
DATE INC/AUTH/FILED: 07/19/1995
JURISDICTION : GEORGIA
PRINT DATE : 08/02/2004
FORM NUMBER : 211

NETWORK SYSTEMS, INC.

WILLIAM LEE 867 WC HODGES ROAD STATESBORO, GA 30461 OV AND 27 PM 2: 59

#### CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the tate of Georgia, do hereby certify under the seal of my office that as of the above print date

NETWORK SYSTEMS, INC.

is in compliance with the approcable filing and annual registration provisions of Title 14 of the Official Redeson Georgia annual registration provisions

Said entity was formed in the jurisdiction brated above or was authorized to transact business in Georgia of the above asse and has not filed articles of dissolution, certificate of Cancellation of the Settetary of Sate.

This certificate relates only to the legs existence of the above-named entity as of the print date above. It does not centify whether or not a notice of intent to dissolve an application for withdrawal, a dratement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of States.

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Records and Signatures Act and 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.

20040802123102168



Cathy Cox Secretary of State