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Tor

Division of Corporations

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From:

Account Name Account Number : FCA000000023

: C T CORPORATION SYSTEM

Phone Fax Number

: (850)222-1092 : (850)222-9428

## FOREIGN PROFIT QUALIFICATION

Arinso International, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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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.

Arinso Internati	onal, Inc.					
(Enter name of c	corporation; must include "INCORPORAT corp," "Inc," "Co," or "Corp.")	ED	," "Company," "Corporation,"			
Of name unavail	able in Florida, enter alternate corporate re	me	adopted for the purpose of transacting busines	s in Florida)		
•				· -		
2. Georgia	under the law of which it is incorporated)	_ 3.	58-2325946 (FEI number, if applicable)		•	
(State or country	under the 12w of which it is incorporated)		•			
4. <u>7/7/1997</u>		5.	Perpetual	tm		
(Date)	e of incorporation)		(Duration: Year corp. Will cease to exist or	betheurar.)		
6. <u>Upon qualificati</u>						
			in Florida, if prior to registration) 502, F.S., to determine penalty liability)			
7, 3535 Piedmont R	tond, NE Suite 1000, Atlanta, GA 30305					
	(Principal office	ade	iress)			
3535 Fiedmont R	oad, NE Suite 1000, Atlanta, GA 30305					
	(Current mailing	\$d	lress)		-	
	•			<u>}</u>	2	
8, software consult	ing			≒	30	
(Purposo(	s) of corporation authorized in home state	or c	nuntry to be carried out in state of Florida)	SS I	1	
9. Name and suc	et address of Florida registered agent:	<b>(P</b> .(	O. Box NOT acceptable)	SEE, J	5	
Name:	CT Corporation System			S.S.	<u>∓</u>	•
Office Address:	1200 South Pine Island Road			BIDA BIDA	53 53	
	Plantation		, Floridz <u>33324</u>			
	(City)		(Zip cade)			
Having been nam designated in this further agree to c	application, I hereby accept the appo	inte es i	ice of process for the above stated corpora ment as registered agent and agree to act i relative to the proper and complete perform psition as registered agent.	n this capac	rity. I	
	CT Corpor	atic	n System			
B	VIIILABLA VIALIGO	کرد	حـــــــــــــــــــــــــــــــــــــ			
	(Registered a	g¢ i	it'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:

. DIRECTO	ORS		
hairman:			
ddress:			
Vice Chairman	:		<del></del>
Address:			
Director: Steph			
	Piedmont Road, NE Suite 1000, Atlanta, GA 30305	_	
<del>-</del>			
			······································
Vocuess:			
B. OFFICE	us		
President: Step	hen Bergson		
Address: <u>3535</u>	Piedmont Road, NE Suite 1000, Atlanta, GA 30305		
		ĘŸ	-6-
Vice President:	HARLEEN VERLAMMEN	ASS.	<del></del>
		EE, C	<del>51</del>
		# S	<del></del>
			<i>∾</i> .
Secretary; Bra			-2.5
	Piedmont Road, NE Suite 1000, Atlanta, GA 30305	<del></del>	
reasurer.			
Address:			
VATE: ###=	annual state and a state of the	- TI P	
	cessary, you may attach an addendum to the application listing additional officers a	and/or directors.	
13	(Signature of Director or Officer listed in number 12 of the application)		
	•		
14	TYPE OF PRINTED PARKS OF PARKS SENIOR		

of Title 14 of the Official today of Georgia Amostated

Secretary of State

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

: X723526 CONTROL NUMBER DATE ING/AUTH/FILED: 07/07/1997 JURISDICTION : GEORGIA 10/06/2004 PRINT DATE FORM NUMBER

CT CORPORATION SYSTEM JIM SONG 1201 PEACHTREE STREET, N.E. ATLANTA, GA 30361

## CERTIFICATE OF EXISTENCE

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

ARIMED LIMERNATIONAL ( INC.) is in compliance with the approcable filing and annual Wegistration provisions

Said entity was flormed in the urisal cuton lifeted above or was authorized to transact business in Seorga on the above balls and has not filed articles of dissolution, certificate of cancellation or solvether mindar document with the Office of the Septetary of State.

This certificate celated out to the least enjet contribe above a med entity as of the print date above [ It does not centify whether or not sometice 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 Statell

This information is electronically transmitted, issued and certified in accordance with the Georgia bid transmitted 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.

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Secretary of State