P.Ø1 Page 1 of 1

10/14/04

Florida Department of State

Division of Corporations Public Access System

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To: Division of Corporations Fax Number : (850)205-0383 From: Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 r (850)222-1092 Fax Number : (850)222-9428 FOREIGN PROFIT QUALIFICATION CCP CircuiText GP, Inc. Certificate of Status Certified Copy 0 Page Count 04 \$70.00 Estimated Charge Name Availability **Document** Examiner PHILIP AC Blacksonie Filing Monu. COLECTED LINES Hoda e Un a er 0 Verifier Ackno. ledgement ___ ひしじ W. P. Verifyer ししじ

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OCT-15-2004 15:33 ฉีฉีฉี~∠บอ~บัชสิ1 CT CORPORATION

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PAGE 001/001 Florida Dept of State



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 15, 2004

CT CORPORATION SYSTEM

SUBJECT: CEP CIRCUITEXT GP, INC

(kef: WD4000037996

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The entity's period of duration must be listed on the application. Pleaseinsert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

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

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Tammi Cline Document Specialist

FAX Aud. #: H04000205570 Letter Number: 104A00059437

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.

	GP, Inc.				
(Buter name of c	orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.")	ED," "COMPA	NY," "CORPORATION,"		
		4 4.6.		The table	
(If dame unavail	able in Florida, enter alternate corporate n		•		
Z. Texas	under the law of which it is incorporated)	_3,	20-1672467 (FEI number, if applicable)		
09/22/04 (Date	of incorporation)	5. //a (Duration	Duration: Year corp. will cease to exist or "perpetual")		
_	, — , , , , , , , , , , , , , , , , , ,	•			
5	(Date first transacted busine			•	
	(SEE SECTIONS 607.1501 & 60	07.1502, F.S., to	determine penalty hability)		
8214 Westchester	r Dr. 9th Ploor Dallax, Texas 75225 (Principal office	address)		<u> </u>	
S	(Poolpas office	*******			
Same	(Current mailing	address)		• .	
	(
	of Limited Partnership				
	of Limited Partnership i) of corporation authorized in home state	or country to be	carried out in state of Florida;	· · · · · · · · · · · · · · · · · · ·	
(Purpose(i		-	·	= -	
(Purpose(i	s) of corporation authorized in home state	-	·	ZODA TALL	
(Purpose(i). Name and stres Name:	i) of corporation authorized in home state of corporation authorized in home state of corporation and corporation and corporation and corporation and corporation and corporation authorized in home state of corporation authorized	-	·	= -	
(Purpose(i). Name and stres Name:	c) of corporation authorized in home state of address of Florida registered agent: C T Corporation System 1200 South Pine Island Road	(P.O. Box <u>NO</u>	<u>T</u> acceptable)	ZODA TALL	
(Purpose(i). Name and stres Name:	c) of corporation authorized in home state of address of Florida registered agent: C T Corporation System 1200 South Pine Island Road Plantation	-	Tacceptable)	ZODA TALL	
(Purpose(i). Name and stres Name: Office Address:	c) of corporation authorized in home state of address of Florida registered agent: C T Corporation System 1200 South Pine Island Road Plantation (City)	(P.O. Box <u>NO</u>	<u>T</u> acceptable)	SECRETARY OF STATE TALLAHASSEE. FLUE	
(Purpose(i). Name and stres Name: Office Address:	c) of corporation authorized in home state of address of Florida registered agent: C T Corporation System 1200 South Pine Island Road Plantation (City) gent's acceptance:	(P.O. Box NO	Tacceptable) ida <u>33324</u> (Zip code)	1004 OCT ILL A 8: 3 SECRETARY OF STATE TALLAHASSEE, FLORE	
(Purpose(i). Name and stres Name: Office Address: O. Registered applicating been name lesignated in this	c) of corporation authorized in home state of address of Florida registered agent: C T Corporation System 1200 South Pine Island Road Plantation (City) gent's acceptance: and as registered agent and to accept so application, I hereby accept the appo	(P.O. Box NO., Florence of proceeding the service of proceeding the se	Tacceptable) ida 33324 (Zip code) ess for the above stated consistenced agent and agree to	SECRETARY OF STATE of the place of the this capacity.	
(Purpose(i). Name and stres Name: Office Address: O. Registered a faving been nam lesignated in this further agree to c	c) of corporation authorized in home state of address of Florida registered agent: C T Corporation System 1200 South Pine Island Road Plantation (City) gent's acceptance: and as registered agent and to accept so application, I hereby accept the appo	(P.O. Box NO., Florence of proceedinates to	Tacceptable) ida 33324 (Zip code) ess for the above stated consistered agent and agree to the proper and complete pe	SECRETARY OF STATE of the place of the this capacity.	
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(Purpose()). Name and stres Name: Office Address: (0. Registered a Having been name lesignated in this further agree to co	c) of corporation authorized in home state of address of Florida registered agent: C T Corporation System 1200 South Pine Island Road Plantation (City) gent's acceptance: and as registered agent and to accept so application, I hereby accept the appoint of the provisions of all status with and accept the obligations of my	(P.O. Box NO Flor Flor	Tacceptable) ida 33324 (Zip code) ess for the above stated consistered agent and agree to the proper and complete pe	SECRETARY OF STATE of the place of the this capacity.	

^{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; PLOIN-0002004 CT Sprint Online

A. DIRECTORS			
Chairman: Same as President			
Address:			
Vice Chaleman: Same as Vice President			
Address:			· · · · ·
			_
Director: Same as Treasurer			
Address:			
Director:			
Address:			
		+ 1 - 14	
B. OFFICERS		•	*3
President: Gil Besing			.
Address: 8214 Westchoster Dr. 9th Floor Dallas Texas 75225			
Vice President: Scott Kipp	<u> </u>	<u></u>	1 . X
Address: 8214 Westchester Dr. 9th Floor Dallas, Texas 75225	- C2		· ·
		2	Carre
Secretary:	333		pro-
Address:	-T-0		C
Treasurer: Mitzi Patin		y. w	
Address: 8214 Westchester Dr. 9th Floor Dalles, Texas 75225			
NOTE: If necessary, you may attach an addendum to the application listing additional officers	s and/or director	TS.	
13			
(Signature of Director or Officer listed in number 12 of the application)	<u>,</u>		 -
14 Mizi Patin Treasurer			
(Typed or printed name and canacity of names similar application)			

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Geoffrey S. Connor Secretary of State

Office of the Secretary of State

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Incorporation for CCP CircuiText GP, Inc. (filing number: 800392975), a Domestic Business Corporation, was filed in this office on September 22, 2004.

It is further certified that the entity status in Texas is active.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on October 11, 2004.



