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Florida Department of State
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To:
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Fax Number : (850) 205-0383

From:
Account Name : TRIAD PROFESSIONAL SERVICES, LLC
Account Number : I20020000094
Phone : (770) 777-2091
Fax Number : (770) 220-1943

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DIVISION OF CORPORATIONS

FOREIGN PROFIT QUALIFICATION

Bridium, Inc.

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W05-40221
J. BRYAN AUG 25 2005

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FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

August 25, 2005

TRIAD PROFESSIONAL SERVICES, LLC

SUBJECT: BRIDIUM, INC.
REF: W05000040221

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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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Joey Bryan
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DIVISION OF CORPORATIONS

Division of Corporations - P.O. BOX 8327 Tallahassee, Florida 32314

(H050002034273)

**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.

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CLERK OF CORPORATIONS
TALLAHASSEE, FLORIDA

1. Bridlum, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

Claims Harbor
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Delaware 3. 58-2542523
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 5-8-2000 5. Perpetual
(Date of incorporation) (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.)
7. 1900 EMERY ST., 2ND FLOOR ATLANTA, GEORGIA 30318
(Principal office address)

1900 EMERY ST., 2ND FLOOR ATLANTA, GEORGIA 30318
(Current mailing address)

8. Claims Processing and Claims Management
(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: NRAI Services, Inc.

Office Address: 2731 Executive Park Drive, Suite 4

Weston, Florida 33331
(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.

NRAI Services, Inc.

By: Sharon M. Knox

(Registered agent's signature)

Sharon M. Knox, Asst. Secretary

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:

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A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

B. OFFICERS

President: Chief Executive Officer: ASHISH BAHL

Address: 215 South Ocean Grande Drive, Unit # 206 Ponte Vedra Beach, FL 32082

Vice President: _____

Address: _____

Secretary: Chief Information Officer: Renganathan Thiagarajan

Address: 2007 Bristol Circle Alpharetta, GA 30022

Treasurer: Chief Financial Officer: Colin Rogoff

Address: 1341 Mile Post Dr. Atlanta, GA 30338

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. Colin Rogoff, Chief Financial Officer
(Typed or printed name and capacity of person signing application)

(H050002034273)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BRIDIUM, 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 FIRST DAY OF AUGUST, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BRIDIUM, INC." WAS INCORPORATED ON THE NINTH DAY OF MAY, A.D. 2000.

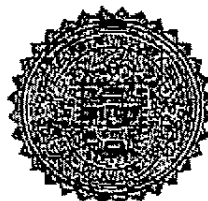
AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State
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DATE: 08-01-05