

Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850) 205-0381

RESUBMIT

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-1000 Fax Number : (850)558-1575

FOREIGN PROFIT/NONPROFIT CORPORATION

Nexion, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	5
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Florida Dept of State

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SCUBE IAKY OF STATE TALLAHASSEE FLORIDA



March 31, 2006

FLORIDA DEPARTMENT OF STATE

Division of Corporations CORPORATION SERVICE COMPANY

SUBJECT: NEXION INC. REF: W06000015533

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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. Nexion (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION." "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 20-0232264 (State or country under the law of which it is incorporated) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) Southlake TX 74092.
(Principal office address) (Current mailing address) 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 NOT acceptable) Name: Office Address:

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. Y 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.

> Jeanine Reynolds triage zij se

(Registered agent's Signature)

11. Attached is a certificate of existence only 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.

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12. Names and offeness sourcess of functs survoy discuss:
A. DIRECTORS
Director Eric J. Speck
Address: 3160 Sabre Drive
Southlake, TX 74092
Proctor Mark R Polliam
Address: 3150 Sabre Drive
Southlake, TX 74092
Director: Michael K. Baldwin
Address: 3160 Salve Drive
Southlake TX 76092
Director:
Address:
B. OFFICERS
Project Michael K Baldwin
Address: 3160 Sabre Drive
Southlake TX 74092
Vice President: Robert Norman
Address: 3160 Sabre Drive
Southlake, TSC 76092
Socretary: James F. Brashear
Address: 3150 Sabre Drive, Southlake, TX 76092
Tronsmer: Federico L. Pensotti
Address: 3150 Sabre Drive, Southlake TX 76092
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13 House
(Signature of Director or Officer listed in number 12 of the application)
14. James F. Brashear, Corporate Servetary (Typed or printed pame and canacity of person signing application)

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Delaware The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NEXION, 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 THIRTIETH DAY OF MARCH, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NEXION, INC." WAS INCORPORATED ON THE SEVENTEENTH DAY OF SEPTEMBER, A.D. 2003.

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.

2006 APR -4 PH 1: 05



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060300493

Warriet Smith Hinden

AUTHENTICATION: 4631530

DATE: 03-30-06