F06000005861

| (Requestor's Name) | | | | | |
|---|--|--|--|--|--|
| (Address) | | | | | |
| (Address) | | | | | |
| (City/State/Zip/Phone #) | | | | | |
| PICK-UP WAIT MAIL | | | | | |
| (Business Entity Name) | | | | | |
| (Document Number) | | | | | |
| Certified Copies Certificates of Status | | | | | |
| Special Instructions to Filing Officer: | | | | | |
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Office Use Only



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SECRE LARY OF STATE
TALLAHASSEE, FLORIDA

MRA

COVER LETTER

| TO: New I | Filing Section ion of Corporations | | | | |
|---------------------------------------|---|---------------------|--|--|--|
| SUBJECT: | Sostram Corporation | . · | | | |
| SCEGECT. | | orporation - must | include suffix) |) | |
| Dear Sir or M | adam: | | | | |
| "Certificate of | "Application by Foreign Corpora f Existence," and check are subm less in Florida. | | | | |
| Please return | all correspondence concerning th | is matter to the fo | llowing: | | |
| Lynn Bro | okhouser | | | | |
| | (| Name of Person) | | | |
| Sostram | Corporation | | | | |
| | | Firm/Company) | | | |
| | nial Center Parkway, S | | | | |
| Roswell, | GA 30076 | (Address) | | | |
| **: 3 * | GA 30076 (Ci | ty/State and Zip c | ode) | | |
| For further in | formation concerning this matter | please call: | | | |
| Nancy Ov | wenby at (| 770 , 587 | 7-1032 | | |
| (Nan | ne of Person) | (Area Code & I | | hone Number) | |
| New Divis Clifto 2661 Tallal | EET/COURIER ADDRESS: Filing Section tion of Corporations on Building Executive Center Circle hassee, FL 32301 check for the following amount: | | MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | |
| \$70.00 Fili | | | Filing Fee & ed Copy | \$87.50 Filing Fee, Certificate of Status & Certified Copy | |

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. Sostram C | Corporation | | | | |
|--------------------------|---|---|--|--|--|
| | orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.") | " "COMPANY," "CORPOR | ATION," | | |
| | | | | | |
| (If name unavaila | able in Florida, enter alternate corporate name | adopted for the purpose of tran | nsacting business in Florida) | | |
| _{2.} Georgia | 3. | 58-2431648 | | | |
| | under the law of which it is incorporated) | which it is incorporated) (FEI number, if applicable) | | | |
| _{4.} January 4. | , 1999 _{5.} | Perpetual | | | |
| (Date | of incorporation) | (Duration: Year corp. will cease to exist or "perpetual") | | | |
| 6. February 2 | 21, 2006 | | | | |
| | (Date first transacted business i (SEE SECTIONS 607.1501 & 607.1 | | | | |
| 7. 300 Coloni | ial Center Parwkay, Suite 23 | 0, Roswell, GA 30 | 076 | | |
| | (Principal office add | ress) | | | |
| 300 Colon | ial Center Parkway, Suite 23 | 0, Roswell, Ga 300 | 076 | | |
| | (Current mailing add | lress) | | | |
| * ' | e of Industrial Chemicals | | | | |
| (Purpose(s | e) of corporation authorized in home state or c | ountry to be carried out in state | of Florida) | | |
| 9. Name and stree | et address of Florida registered agent: (P. | D. Box NOT acceptable) | 4 0 | | |
| Name: | CT Corporation System | | SECRETARIAN SECRET | | |
| Office Address: | 1200 South Pine Island Ro | ad_ | HASS. 12 | | |
| | Plantation, | , Florida 33324 | PH 4: 17 SSEE, FLORIG | | |
| | (City) | (Zip code) | TSI F. D | | |
| | gent's acceptance: | | <u></u> , | | |
| riaving been nam | ed as registered agent and to accept serv | ice oj process jor ine above | statea corporation at the place | | |

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.

(Redistered agent's signature)

MARY R. ADAMS
ASSISTANT 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: A. DIRECTORS Chairman: Address: ___ Vice Chairman: Address: __ Director: _ Address: _ **B. OFFICERS** President: Lynn Brookhouser Address: 300 Colonial Center Parkway, Suite 230 Roswell, GA 30076 Vice President: Keith Daniel Address: 300 Colonial Center Parkway, Suite 230 Roswell, GA 30076 Secretary: Robert Crosby Address: 1500 Marquis Tower, 285 Peachtree Ctr Ave. NE., Atlanta, Ga 30303 Treasurer: Address: _____ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) 14. Lynn Brookhouser, President

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

Control No. K

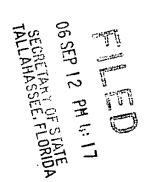
K902067

STATE OF GEORGIA

Secretary of State

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

CERTIFICATE OF EXISTENCE



I, Cathy Cox, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

SOSTRAM CORPORATION

Domestic Profit Corporation

was formed or was authorized to transact business on 01/04/1999 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice 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 State.

This certificate is issued pursuant to 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.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 31st day of May, 2006

Cathy Cox Secretary of State

Certification Number: 83172-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp