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(Requestor's Name)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
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(Business Entity Name)			
(Document Number)			
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SECRETARY OF STATE

T. Burch OCT 18 2006

T. Burch CCT to and

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: <u>Summit</u> Techn	alogues Inc.
	poration - must include suffix)
Dear Sir or Madam:	
	on for Authorization to Transact Business in Florida," ed to register the above referenced foreign corporation to
Please return all correspondence concerning this	matter to the following:
Smita Patel	
(Na	me of Person)
Summit Technologies Inc	
(Fi	m/Company)
45 South Main Street-	Suite 040
	(Address)
West Hartford CT	7000
(City/	State and Zip code)
For further information concerning this matter, pl	ease call:
Smita Patel at (5	360) 570-0661
(Name of Person) (360) 570~066(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$\sum \text{\$78.75 Filing Fee & Certificate of Status}	S78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy

IN COMPLIANCE WITH SECTION FOR ISOR FLORIDA STATUTES THE FOLLOWING IS SUBMITTED TO

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

	PREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORID	TALL
(Enter name of	corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," Corp.," "Inc.," "Co.," or "Corp.")	SE JARY O
	4mmit IT Sorvices Inc.	
(If name unavail	lable in Florida, enter alternate corporate name adopted for the purpose of transacting busi	iness in Florida) 🗘
2. Carar	roctiont 3. 06-1477298 y under the law of which it is incorporated) (FEI number, if applicable	
(State or country	under the law of which it is incorporated) (FEI number, if applicable	;)
4. Jan	vary 21, 1997 5. perpetual	_
(Date	cofincorporation) 5. Perpetual (Duration: Year corp. will cease to exist	or "perpetual")
6. Oc	toker 4, 2006	
	(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) **DUTH MOUN Street - Suite O40; West Harting (Principal office address) **e as above	19 CL 00101
	(Current mailing address)	,
(Purpose(et address of Florida registered agent: (P.O. Box NOT acceptable)	Solutions
Name;	Business Filings Incorporated	
Office Address:	1203 Governors Square Boulevord - Suite 10	7/
	Tallahassee , Florida 32301-2960 (City) (Zip code)	
	gent's acceptance: ned as registered agent and to accept service of process for the above stated corpo	oration 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.

(Registered agent's signature) Business Films Inclut parated

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: Poul Patel Address: 45 South Main-St - Surbc Oso: West Hartford CT 06107 Vice Chairman: Christophor Colma Address: 45 South Main St. Suite 040; West Hartford CT 06107 Director: Smith Patch Address: AS Spoth main St. Suita OAO; West Harthard CT Oblo7 Director: Address: ___ **B. OFFICERS** President: __ Paul Patul Address: 45 South Main St. Sutc 040; West Hartford CT 06107 Vice President: Christopher Calma Address: AS SOUTH Main St. Suite DAD: West Harthord CT Objo? Secretary: Smitg Potch Address: 45 South Main St. Suite OAO: West Hartland CT D6107 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. SMITA PATEL - CFO (Typed or printed name and capacity of person signing application)

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that the certificate of incorporation of

SUMMIT TECHNOLOGIES, INC.

a domestic STOCK corporation, was filed in this office on January 21, 1997, a certificate of dissolution has not been filed, the corporation has filed all annual reports, and so far as indicated by the records of this office such corporation is in existence.

Secretary of the State

Date Issued: August 30, 2006

SECRETARY OF STATE

Business ID: 0552356 Express Certificate Number: 2006206753001

Note: To verify this certificate, visit the web site http://www.concord.sots.ct.gov