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To:

Division of Corporations

Fax Number : (850) 205-0381

From:

Account Name : DLA PIPER RUDNIK GRAY CARY US, LLP (ATLANTA)

Account Number : I20060000104

Phone : (404) 736-7833

Fax Number : (404) 682-7833

FOREIGN PROFIT/NONPROFIT CORPORATION

Skyway Software, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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12/01/2006 09:33 FAX

002/006

002/004

11/15/2006 WED 16:41 FAX 8132888266 Skyway Software, Inc.

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Skyway Software, Inc.

(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Rebecca Saferstein, Paralegal

(Name of Person)

DLA Piper US LLP

(Firm/Company)

1201 W. Peachtree ST, Suite 2800

(Address)

Atlanta, GA 30309

(City/State and Zip code)

For further information concerning this matter, please call:

Rebecca Saferstein, Paralegal at (404) 736-7833

(Name of Person)

(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 ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified 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. Skyway Software, Inc.

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

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware

(State or country under the law of which it is incorporated)

3.

(FBI number, if applicable)

4.

(Date of incorporation)

5.

Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 208 South Hoover Blvd., Suite 100, Tampa, FL 33609

(Principal office address)

208 South Hoover Blvd., Suite 100, Tampa, FL 33609

(Current mailing address)

8. Any and all lawful business

(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 NOT acceptable)

Name: Larry Sledge

Office Address: 208 South Hoover Blvd., Suite 100

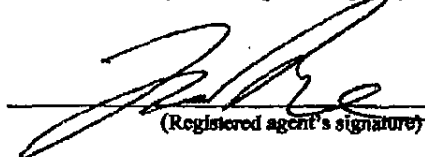
Tampa, Florida 33609

(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.



(Registered agent's signature)

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.

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12/01/2006 09:34 FAX

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11/15/2006 WED 16:42 FAX 8132888266 Skyway Software, Inc.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: See attached list

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: See attached list

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. [Signature]

(Signature of Director or Officer listed in number 12 of the application)

14. Larry Stodge VP Finance

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

SKYWAY SOFTWARE, INC.
List of Officers and Directors

Name	Address	Title
Daniel S. Aegerter	208 South Hoover Boulevard Suite 100 Tampa, FL 33609	Chairman of the Board
I. Sigmund Mosley	945 East Paces Ferry Road Suite 2450 Atlanta, GA 30326-1125	Director
Stewart Bertron	208 South Hoover Boulevard Suite 100 Tampa, FL 33609	Director
Sean Walsh	208 South Hoover Boulevard Suite 100 Tampa, FL 33609	Director, Chief Executive Officer
Jared Rodriguez	208 South Hoover Boulevard Suite 100 Tampa, FL 33609	Chief Technology Officer
Larry Sledge	208 South Hoover Boulevard Suite 100 Tampa, FL 33609	Secretary and Treasurer

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Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SKYWAY SOFTWARE, 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 SEVENTEENTH DAY OF NOVEMBER, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SKYWAY SOFTWARE, INC." WAS INCORPORATED ON THE FIFTEENTH DAY OF NOVEMBER, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.



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Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5205868

DATE: 11-17-06