# F67600000157

| (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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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 27, 2006

HANH NGUYEN 14726 RAMONA AVE 3RD FL CHINO, CA 91710

SUBJECT: ALORICA INC. Ref. Number: W06000055224

We have received your document for ALORICA INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Letter Number: 206A00072687

Cynthia Blalock Document Specialist

07 JAN 10 PM 9: 22

#### **COVER LETTER**

SECRETARY OF STATE TALLAHASSEE, FLORIDA

| TO: New Filing Section Division of Corporations   | The state of the s |
|---|--|
| SUBJECT: Alorica Inc.   |  |
| (Name of corporation  | on - must include suffix)  |
| Dear Sir or Madam:  |  |
| The enclosed "Application by Foreign Corporation for "Certificate of Existence," and check are submitted to retransact business in Florida. |  |
| Please return all correspondence concerning this matter   | to the following:  |
| Hanh Nguyen, Legal Departmen  | nt   |
| (Name of  | <del></del>  |
| Alorica Inc.  |  |
| (Firm/Co  | mpany)   |
| 14726 Ramona Ave., 3rd floor  |  |
| (Addi   | -  |
| -Chino, CA 91710  |  |
| Chino, CA 91710 (City/State a   | and Zip code)  |
| For further information concerning this matter, please c  | eall:  |
| Hanh Nguyen, Legal Department at 909  | , 606-3610   |
| (Name of Person) (Area (  | Code & Daytime Telephone Number)   |
|   | ı  |
| STREET/COURIER ADDRESS:   | MAILING ADDRESS:   |
| New Filing Section  | New Filing Section   |
| Division of Corporations Clifton Building   | Division of Corporations P.O. Box 6327   |
| 2661 Executive Center Circle Tallahassee, FL 32301  | Tallahassee, FL 32314  |
| Enclosed is a check for the following amount:   |  |
| \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status   |  |
| .,  | •  |

## 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. L Alorica 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 <sub>2</sub> California California

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

(FEl number, if applicable) 4, 4/27/1999 (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") 6. 3/2006 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 14726 Ramona Ave., 3rd floor, Chino CA 91710 (Principal office address) 14726 Ramona Ave., 3rd floor (Current mailing address) 8. All lawful business purposes. (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) Corporation Service Company Name: Office Address: 1201 Hays Street <u>Tallahassee</u> 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. Sarah K. Drake as its agent

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.

(Registered agent's signature)

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

| A. | DIRECTORS |  |
|----|-----------|--|

| SECTIETARY OF STALLAHASSEE, FLO | ORIDA |
|---------------------------------|-------|
|---------------------------------|-------|

| Chairman: Joyce Lee   |  |
|---|--|
| Address: c/o Alorica Inc., 14726 Ramona Ave, 3rd floor, Chino CA 91710  | <u>)</u>                                     |
|   |  |
| Vice Chairman: N/A  |  |
| Address:  |  |
|   |  |
| Director: Y.C. Liu  |  |
| Address: c/o Alorica Inc., 14726 Ramona Ave, 3rd floor, Chino CA 9171   | <u>0</u>                                     |
| D-L-L-A   |  |
| Director: Bob Luke  |  |
| Address: c/o Alorica Inc., 14726 Ramona Ave, 3rd floor, Chino CA 91710  | <u>)                                    </u> |
|   |  |
| B. OFFICERS   |  |
| President: Y.C. Liu   |  |
| Address: c/o Alorica Inc., 14726 Ramona Ave, 3rd floor, Chino CA 91710  | <u>)</u>                                     |
|   |  |
| Vice President: N/A   |  |
| Address:  |  |
|   |  |
| Secretary: Joyce Lee  |  |
| Address: c/o Alorica Inc., 14726 Ramona Ave, 3rd floor, Chino CA 91710  | <u> </u>                                     |
| Treasurer: (CFO) Jack Pollock   |  |
| Address: c/o Alorica Inc., 14726 Ramona Ave, 3rd floor, Chino CA 91710  | <u>)                                    </u> |
|   |  |
| 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)                                   | —  |
| JAN PRILARY OFF   |  |
| (Typed or printed name and capacity of person signing application)  | <del></del>                                  |

### State of California Secretary of State

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SECNEVALLY OF STATE TALLAHASSEE, FLORIDA

## CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, BRUCE McPHERSON, Secretary of State of the State of California, hereby certify:

That on the **27th day of April 1999**, **ALORICA INC.**, became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of October 25, 2006.

GEAL OF THE CONTROL O

BRUCE McPHERSON Secretary of State