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| Special Instructions to F | iling Officer: | |
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Office Use Only



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Cheryl M. Duren (816) 691-2664

cduren@stinson.com
www.stinson.com

1201 Walnut, Suite 2900 Kansas City, MO 64106-2150

Tel (816) 842-8600 Fax (816) 412-1120

March 15, 2007

VIA FEDERAL EXPRESS

Florida Department of State New Filing Section Division of Corporation Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re:

DSI/Data Source, Inc.

Dear Sir or Madam:

Enclosed for filing is an Application by Foreign Corporation for Authorization to Transact Business in Florida for the above referenced entity. Our firm's check in the amount of \$70.00 is also enclosed.

Once filed, please return the filed stamped copy to my attention. For your convenience a self addressed envelope has been enclosed.

If you have any questions or need additional information, please do not hesitate to contact us.

Yours very truly,

STINSON MORRISON HECKER LLP

Cheryl M. Duren

Paralegal

KANSAS CITY

OVERLAND PARK

WICHITA

WASHINGTON, D.C.

PHOENIX

ST. LOUIS

OMAHA

JEFFERSON CITY

Enclosures

COVER LETTER

| TO: New Filing S Division of C | | | |
|--|---|--|---|
| SUBJECT: DSI/Da | ata Source, Inc. | | |
| | | ration - must include suffix |) |
| Dear Sir or Madam: | | | |
| | cation by Foreign Corporation nce," and check are submitted lorida. | | |
| Please return all corre | espondence concerning this m | atter to the following: | |
| | Cheryl Duren, Paralegal | | |
| | (Nan | ne of Person) | |
| | Stinson Morrison Hecker LL | P | |
| | (Firm | n/Company) | TALE OF |
| | 1201 Walnut Street, Ste 2900 | | CRE S |
| | (. | Address) | 33 E |
| | Kansas City, MO 64106 | | SEE FILE |
| | (City/S | tate and Zip code) | EST ST |
| For further information | on concerning this matter, plea | ase call: | 3: 36 FLORIDA |
| Cheryl Duren, Paraleg | at (810 | 691-2664 | |
| (Name of Po | | rea Code & Daytime Telepl | none Number) |
| New Filing S Division of C Clifton Build 2661 Executi Tallahassee, | Corporations ing ve Center Circle | MAILING A New Filing S Division of C P.O. Box 632 Tallahassee. | Section Corporations 27 |
| \$70.00 Filing Fee | S78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy | S87.50 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.

| (If name unavai | lable in Florida, enter alternate corporate na | me adopted for the purpose of transacting business in Florid |
|--|---|--|
| Delaware | | 3. |
| (State or country | under the law of which it is incorporated) | (FEI number, if applicable) |
| 03/06/2007 | | 5. Perpetual |
| (Dat | e of incorporation) | (Duration: Year corp. will cease to exist or "perpetual" |
| 03/12/2007 | | |
| | | ss in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability) |
| 1400 Universe | Avenue, Kansas City, MO 64120 | F |
| 1400 Olliversal | (Principal office a | address) |
| same | , | |
| Surre | (Current mailing a | uddraes) |
| | (| addicss) |
| | (| nutress) |
| SEE ATTACH | · · · · · · · · · · · · · · · · · · · | aduress) |
| *************************************** | MENT | r country to be carried out in state of Florida) |
| (Purpose(| MENT s) of corporation authorized in home state o | r country to be carried out in state of Florida) |
| (Purpose(| MENT | r country to be carried out in state of Florida) |
| (Purpose(| MENT s) of corporation authorized in home state o | r country to be carried out in state of Florida) |
| (Purpose(Name and stre | MENT s) of corporation authorized in home state or et address of Florida registered agent: (C T Corporation System | r country to be carried out in state of Florida) |
| (Purpose(Name and stree Name: | MENT s) of corporation authorized in home state or et address of Florida registered agent: (| r country to be carried out in state of Florida) |
| (Purpose(Name and stre | MENT s) of corporation authorized in home state of et address of Florida registered agent: (C T Corporation System 1200 South Pine Island Road Plantation | P.O. Box NOT acceptable) P.O. Box NOT acceptable) P.O. Box NOT acceptable |
| (Purpose(Name and stree Name: | MENT s) of corporation authorized in home state of et address of Florida registered agent: (C T Corporation System 1200 South Pine Island Road | P.O. Box NOT acceptable) P.O. Box NOT acceptable) |
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| (Purpose) Name and stre Name: Office Address: | MENT s) of corporation authorized in home state of et address of Florida registered agent: (2 C T Corporation System 1200 South Pine Island Road Plantation (City) gent's acceptance: | P.O. Box NOT acceptable) P.O. Box NOT acceptable) TOTAL SECTION SECT |
| (Purpose) Name and stre Name: Office Address: O. Registered a | MENT s) of corporation authorized in home state of et address of Florida registered agent: (CT Corporation System 1200 South Pine Island Road Plantation (City) gent's acceptance: ned as registered agent and to accept se | P.O. Box NOT acceptable) P.O. Box NOT acceptable) Florida 33324 (Zip code) Trice of process for the above stated corporation at the |
| (Purpose) Name and stre Name: Office Address: Office Registered attacking been namessignated in this | MENT s) of corporation authorized in home state of et address of Florida registered agent: (CT Corporation System 1200 South Pine Island Road Plantation (City) gent's acceptance: ned as registered agent and to accept see application, I hereby accept the appoint | P.O. Box NOT acceptable) P.O. Box NOT acceptable) Florida 33324 (Zip code) Trvice of process for the above stated corporation at the nument as registered agent and agree to act in this cap |
| (Purpose) Name and stre Name: Office Address: Office Address: Office Address: | MENT s) of corporation authorized in home state of et address of Florida registered agent: (CT Corporation System 1200 South Pine Island Road Plantation (City) gent's acceptance: ned as registered agent and to accept see application, I hereby accept the appoint | P.O. Box NOT acceptable) Florida 33324 (Zip code) Tryice of process for the above stated corporation at the natural as registered agent and agree to act in this cap as relative to the proper and complete performance of |
| (Purpose) Name and stree Name: Office Address: O. Registered a laving been nan designated in this arther agree to designate and the street agree to designate agree | MENT s) of corporation authorized in home state of et address of Florida registered agent: (E.C. T. Corporation System 1200 South Pine Island Road Plantation (City) gent's acceptance: ned as registered agent and to accept sees application, I hereby accept the appointments of all statute | P.O. Box NOT acceptable) Florida 33324 (Zip code) Tryice of process for the above stated corporation at the natural as registered agent and agree to act in this cap as relative to the proper and complete performance of |
| (Purpose) Name and stree Name: Office Address: O. Registered a laving been nan designated in this arther agree to designate agree agre | MENT s) of corporation authorized in home state of et address of Florida registered agent: (E. C. T. Corporation System 1200 South Pine Island Road Plantation (City) gent's acceptance: ned as registered agent and to accept see application, I hereby accept the appoint comply with the provisions of all statute with and accept the obligations of my C. T. Corporation System | P.O. Box NOT acceptable) Florida 33324 (Zip code) Tryice of process for the above stated corporation at the natural as registered agent and agree to act in this cap as relative to the proper and complete performance of |
| Name and stree Name: Office Address: O. Registered a Javing been nan Jesignated in this Jurther agree to a and I am familia | MENT s) of corporation authorized in home state of et address of Florida registered agent: (E. C. T. Corporation System 1200 South Pine Island Road Plantation (City) gent's acceptance: and to accept see a application, I hereby accept the appoint comply with the provisions of all statute or with and accept the obligations of my | P.O. Box NOT acceptable) Florida 33324 (Zip code) Tryice of process for the above stated corporation at the natural as registered agent and agree to act in this cap as relative to the proper and complete performance of |

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. DIR | ECTORS |
|-----------|---|
| Chairman | r: |
| Address: | |
| | |
| Vice Cha | irman: |
| Address: | |
| | |
| Director: | Sherie Bartlett |
| Address: | 1400 Universal Avenue |
| | Kansas City, MO 64120 |
| Director: | Thomas A. Bartlett |
| Address: | 1400 Universal Avenue |
| | Kansas City, MO 64120 |
| B. OFF | icers |
| President | Sherie Bartlett |
| Address: | 1400 Universal Avenue |
| | Kansas City, MO 64120 |
| Vice Pres | ident: Thomas A. Bartlett |
| Address: | 1400 Universal Avenue |
| | Kansas City, MO 64120 |
| Secretary | : LoritZacharias-Verdi |
| Address: | 1400 Universal Avenue, Kansas City, MO 64120 |
| Treasurer | |
| Address: | |
| NATE. | TO an analysis of the state of |
| | 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) |
| 14. Sher | rie Bartlett, President |
| | (Typed or printed name and capacity of person signing application) |

Attachment to Florida Purpose Clause

To engage in any act or activity for which a corporation may be qualified including but not limited to the printing, manufacturing and distribution of business forms.



ACCEPTANCE OF APPOINTMENT

RE: DSI/Data Source, Inc.

Pursuant to Sections 48.091 and 607.0501, Florida Statutes, the undersigned acknowledges and accepts its appointment as registered agent of the above corporation and agrees to act in the capacity and to comply with the provisions of the Florida Business Corporation Act (1990) relative to keeping open the registered office at the address specified above. The undersigned is familiar with, and accepts the obligations of, Section 607.0505, Florida Statutes.

By_

Dated:

8 March 2007

C T CORPORATION SYSTEM

Jonathan L. Miles, Assistant Secretary

O7 MAR 16 PN 3: 36
SECRETARY OF STATE

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DSI/DATA SOURCE, 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 TWELFTH DAY OF MARCH, A.D. 2007.

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

O7 MAR 16 PM 3: 36
SECRETARY OF STATE



4312985 8300 070305809 Warriet Smith Windson, Secretary of State

Trainer Smith Windson, Secretary of

AUTHENTICATION: 5497844

DATE: 03-12-07