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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
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	Office Use Only	······································



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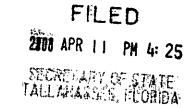
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Burch APR 11200

COVER LETTER

TO: New Filing S Division of C			
SUBJECT:	A-DATA TE	chNoto Gy (4.5.	A.) CO. LTD.
	(Name of corpo	oration - must include suffix)
Dear Sir or Madam:			
	eation by Foreign Corporation nce," and check are submitted lorida.		
Please return all corre	espondence concerning this m	atter to the following:	
WELL-VE	ENTWILL I'M		
	(Nan	ne of Person)	
A-DATA	TECHNOLOGY (Firm) (W. 107 HS AKE	(U.S.A.) Co.	LTA
	(Firm	n/Company)	
2500 N	W INTH AVE	Cuite 20	2
	(i.e., por pare	Address)	<u>«</u>
miami	F1 3319	•	
7. 1.41111	, FL. 3317 (City/S	ate and Zin and a)	
	(Cityrs	iaic and Zip code)	
For further information	on concerning this matter, plea	ase call:	
11/6/11. 1/6.1	Com Vine o	01 210 22	
Nome of De	(Will) LiN at (7 rson) (A	26) \$10 - 232	hour Number
(Hattic Of Fc	ison) (A	rea Code & Daytime Telep	none Number)
STREET/CO	OURIER ADDRESS:	MAILING A	ADDRESS:
New Filing S		New Filing S	
Division of C Clifton Build	•	Division of (P.O. Box 63)	•
	ve Center Circle	Tallahassee,	= '
Enclosed is a check for	or 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.

(Enter name of c	DATA TECHNOLI corporation; must include "INCO	ORPORATED,"	"COMPANY," "CO	RPORATION,"
"Inc.," "Co.," "C	Corp," "Inc," "Co," or "Corp.")			
				e of transacting business in Florida)
CALIF	ORN IA	3,	71-089	umber, if applicable) TURE will cease to exist or "perpetual")
State or country	under the law of which it is inc	orporated)	(FÉI n	umber, if applicable)
<u>8-1</u>	6-2002	\$	PERP	ETUAL
(Date	e of incorporation)		(Duration: Year corp	will cease to exist or "perpetual")
	/Date first transa	sted business in	Florida, if prior to reg	vietnation)
	(SEE SECTIONS 607			
3	149 SKYWAY CO (Princ 149 SKYWAY CO	URT FR	EMONT, CA	94539
	/ (Princ	cipal office addre	ess)	
Э	149 SKYWAY CO	PURT F	REEMONT,	A 94539
	(Curre	ent mailing addre	-c+)	
	•		-33)	
	•		,-ss <i>)</i>	
(Purpose(s	s) of corporation authorized in h			
		nome state or cou	intry to be carried out	in state of Florida)
Name and stree	s) of corporation authorized in h	nome state or cou	intry to be carried out	in state of Florida)
Name and <u>stree</u> Name:	s) of corporation authorized in he et address of Florida registere WEU-YEH (Will	nome state or counted agent: (P.O.	ntry to be carried out Box <u>NOT</u> acceptal	in state of Florida)
Name and <u>stree</u> Name:	s) of corporation authorized in he et address of Florida registere WEU-YEH (Will	nome state or counted agent: (P.O.	ntry to be carried out Box <u>NOT</u> acceptal	in state of Florida)
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Name and <u>stree</u> Name:	s) of corporation authorized in h	nome state or counted agent: (P.O.	ntry to be carried out Box <u>NOT</u> acceptal	in state of Florida)
Name and <u>street</u> Name: ice Address: Registered ap	S) of corporation authorized in heat address of Florida registere WELL-YEH (Will 2500 NW 10 Miami (City) gent's acceptance:	nome state or counted agent: (P.O.	notry to be carried out Box NOT acceptal Suite* 203 , Florida 33 (Zip	in state of Florida) ole) (172 code)
Name and <u>street</u> Name: Tice Address: Registered apving been name	S) of corporation authorized in heat address of Florida registere WELL-YEH (Will 2500 NW 10 Miami (City) gent's acceptance: and as registered agent and to	nome state or counted agent: (P.O. L) Lin Ave	Box NOT acceptal Suite* 203 , Florida 33 (Zip	in state of Florida) ole) 172 code) above stated corporation at the p
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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: SHALLEY LING-CHUAN CHEN Address: 3149 SKYWAY COLLET Freemont, CA. 94539 Vice Chairman: Address: Director: ___ Director: Address: . **B. OFFICERS** President: CHIA ZONE WU Address: 3149 Skyway CoultT Freement, CA. 94539 Vice President: ____ Address: Secretary: SHALLEY LING-CHUAN CHEN Address: 3149 Skyway Court FREEMONT CA. 94539 SHALLEY LING-CHUAN CHEN Treasurer: ___ 3149 SKYWAY COURT FREEMONT, CA. 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) CEO

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

State of California Secretary of State FILED

200 APR 11 PM 4: 25

ECREGARY OF STATE
TALLAMASSES, MEDINIA

CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

That on the 16 th day of August 2002 A-DATA TECHNOLOGY (U.S.A.) CO., LTD. became recognized 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 January 15, 2008

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John Boren

DEBRA BOWENSecretary of State