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	New Filing S Division of C			•		
SUBJE	CT:	O LAMET			ORATION est include suffi	`
Dear Sir	or Madam:					
"Certific		nce," and check are				sact Business in Florida," renced foreign corporation
Please re	eturn all corre	espondence concer	ning this n	atter to the	following:	
S	ARAH	RAWLIN	65			
			(Nar	ne of Person	n)	
<u></u>	LAM	ETER IN	JC.			
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For furth	er information	on concerning this	matter, ple	ase call:		
ER	Name of Pe	SIWA_	at (<u>5</u>		82-22 Daytime Tele	None Number)
1 I (New Filing S Division of C Clifton Build	orporations ing ve Center Circle	SS:		New Filing	Corporations 27
Enclosed	l is a check fo	or the following am	ount:			
\$70.00) Filing Fee	\$78.75 Filin Certificate			5 Filing Fee & fied Copy	\$87.50 Filing Fee, Certificate of Statu Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLO	RIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRAN 1 OLAMETER CORPORATION	SACT BUSINESS IN THE STATE OF PLOPEDA.
(Enter name of corporation; must include "INCORPOI" "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	RATED," "COMPANY," "CORPORATION,"
(If name unavailable in Florida, enter alternate corpora	tte name adopted for the purpose of transacting business in Florida)
2. Delaware	3. 0 208597
(State or country under the law of which it is incorporate	ted) (FEI number, if applicable)
4. 07-07-1999	5. PERPETUAL
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6. <u>n</u> a	
	usiness in Florida, if prior to registration) & 607.1502, F.S., to determine penalty liability)
7. OLAMETER COLPORATION (Principal of	366 North Broadway, Svite 410, Jericha
Sama as about #7	,
(Current mai	lling address)
	Field Services rate or country to be carried out in state of Florida)
9. Name and street address of Florida registered ages	· · ·
Name: Corporation Service Com	pany
Office Address: 1201 Hays Street	
Tallahassee	, Florida 32301
(City)	(Zip code)
designated in this application, I hereby accept the a further agree to comply with the provisions of all stand I am familiar with and accept the obligations of Corporation-Service Compar	
By: (Registered agent's sig	gnature)
	ticated, not more than 90 days prior to delivery of this application to other official having custody of corporate records in the jurisdiction

A. DIRECTORS	FILED
Chairman: JAN PEETERS	2009 ADD 1
Address: 2000 McGill College, Suite 500	2008 APR 17 ₱ 2: 17
Montreal Quebec CANADA, H3A 3H3	TALLAHASSEE. FLORID
Vice Chairman:	· · · · · · · · · · · · · · · · · · ·
Address:	· · ·
Director: MICHAEL BOYD	
Address: 3430 Peel Street, APT. PH-D	
Montreal, Quebec, CANADA, H3A 3K8	
Director: Robert de FOUGEROLLES	
Address: KINGSDOWN HOUSE, KINGSDOWN, near RODME	ERSHAM
KENT, ENGLAND, ME9 ORA	
B. OFFICERS	
President: JAN PEETERS	
Address: 2000 Mc Gill College, Suite 500	
Montreal, Quebec, CANADA, H3A 3H3	
Vice President: JEAN-PIERRE CARETTE (VP FINANCE ;	AOMINISTRATION)
Address: 2000 McGill College, Suite 500	
Montreal, Quebec, CANADA, H3A 3H3	
JOHN FELTIS (VP DUSINESS LEVELOPMENT)	1.61.2010
Address: 2609 DONWIN DRIVE, HISSISSONGA, ONTARIO, CANADA, INC. PRESINT MICHAEL LUNAU (VP METER READING & FIELD SER	
	^
Address: 300 Industrial Parkury South, Aurora, Ontario,	<u>CANADA L4G -</u> 3T9
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)	
14. (Typed of printed name and capacity of person signing application)	

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: _ Vice Chairman: ____ Address: Director: BYRON L. KNIEF Address: PARKTAVENUE PLAZA 55 EAST 52NO STREET. NEW-YORK, NY, USA, 10055 EARNSCLIFFE AVENUE **B. OFFICERS** President: _____ Address: ____ AURORA, ONTARIO, CANADA L4G 3T9 Secretary: _ Address: _ 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)

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

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SECRETARY OF STATE

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OLAMETER CORPORATION" 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 ELEVENTH DAY OF APRIL, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CLAMETER CORPORATION" WAS INCORPORATED ON THE SEVENTH DAY OF JULY, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

3066701 8300

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Varuet Smith Hinden Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6519561

DATE: 04-11-08

You may verify this certificate online at corp. delaware. qov/authver.shtml