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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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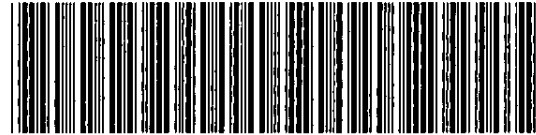
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: ALDIS, 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:

MATT CARR
(Name of Person)

ALDIS, INC.
(Firm/Company)

702 S. ILLINOIS AVE SUITE B101
(Address)

OAK RIDGE TN, 37830
(City/State and Zip code)

For further information concerning this matter, please call:

MATT CARR at (865) 482-2112
(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. ALDIS 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. DE 3. 205899102
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 5/21/07 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. APPLYING FOR AUTHORIZATION
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 702 S. ILLINOIS AVE. SUITE B101, OAK RIDGE, TN, 37830
(Principal office address)
- SAME
(Current mailing address)
8. TRAFFIC TECHNOLOGY
(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: CT CORPORATION SYSTEM
- Office Address: 1200 SOUTH PINE ISLAND RD.
PLANTATION, Florida 33324
(City) (Zip code)

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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.

Danny Verdecchia, Jr.
(Registered agent's signature)

Danny Verdecchia, Jr. Asst. Secretary

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: GLEN KLINE

Address: INNOVATION VALLEY PARTNERS 10702 MURDOCK RD.
KNOXVILLE, TN, 37932

Vice Chairman: N/A

Address: _____

Director: KEF KASDIN

Address: BATTELLE VENTURES, LP 103 CARNEGIE CENTER, SUITE 100
PRINCETON, NJ 08540

Director: _____

Address: _____

B. OFFICERS

President: JAMES SHERRILL

Address: 702 S. ILLINOIS AVE SUITE B101
OAK RIDGE, TN 37830

Vice President: N/A

Address: _____

Secretary: WILLIAM A. MALKES

Address: 702 S. ILLINOIS AVE SUITE B101, OAK RIDGE, TN 37830

Treasurer: WILLIAM A. MALKES

Address: SAME

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

13. WGA Malkes
(Signature of Director or Officer listed in number 12 of the application)

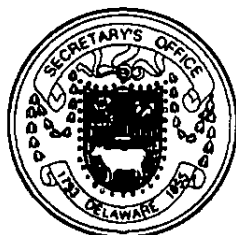
14. WILLIAM A. MALKES
(Typed or printed name and capacity of person signing application)

Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ALDIS, 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 THIRTEENTH DAY OF AUGUST, A.D. 2008.



4354555 8300

080869965

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

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6791389

DATE: 08-13-08