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| Special Instructions to | Filing Officer: | | | |
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Office Use Only

W08-44159

COVER LETTER

| TO: New Filing Section Division of Corporations | |
|--|---|
| SUBJECT: Wallingford Software, Inc. | |
| (Name of corporation - 1 | nust include suffix) |
| Dear Sir or Madam: | |
| The enclosed "Application by Foreign Corporation for Autl "Certificate of Existence," and check are submitted to regis transact business in Florida. | |
| Please return all correspondence concerning this matter to t | he following: |
| Cindy Bright | |
| (Name of Per | son) |
| Wallingford Software, Inc. | |
| (Firm/Compa | ny) |
| 6015 Harris Parkway, Suite 120 | |
| (Address) | |
| Fort Worth, TX 76132 | 7: 1.\ |
| (City/State and 2 | zip code) |
| For further information concerning this matter, please call: | |
| Cindy Bright at (817) | 370-2425 |
| (Name of Person) (Area Code | & Daytime Telephone Number) |
| STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building | MAILING ADDRESS: New Filing Section 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: | |
| | 8.75 Filing Fee & S87.50 Filing Fee, crtified Copy Certificate of Status & Certified Copy |



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 23, 2008

CINDY BRIGHT 6015 HARRIS PARKWAY SUITE 120 FORT WORTH, TX 76132

SUBJECT: WALLINGFORD SOFTWARE INC

Ref. Number: W08000044159

We have received your document for WALLINGFORD SOFTWARE 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 name listed in number one of the application must be identical to the name listed in the certificate of existence.

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4) or 608.502(4), F.S., this office is required to collects a civil penalty of \$1,000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

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 the corrected original and one copy of 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) 245-6931.

Becky McKnight Regulatory Specialist II New Filing Section

Letter Number: 108A00051264

under the law of which it is incorporated.

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. Wallingto | ord Software, Inc. | , | | | |
|------------------------------------|--|--|------------------------------|------------------|----|
| (Enter name of | corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp.") | O," "COMPANY," "CORPORATION," | | | |
| , | | | | | |
| | | : | | | |
| (If name unavai | lable in Florida, enter alternate corporate nam | e adopted for the purpose of transacting busines | s in Florida) | | |
| _{2.} Texas | 3 | 7 5- 2955414 | | | |
| (State or country | under the law of which it is incorporated) | (FBI number, if applicable) | | | |
| 4. <u>Sept</u> | ember 6,2001 5 | Perpertual | | | |
| (Dar | e of incorporation) | (Duration: Year corp. will cease to exist or " | регреtual") | | |
| 6 | | | | | |
| | (Date first transacted business (SEE SECTIONS 607.1501 & 607.1 | in Florida, if prior to registration) 1502, F.S., to determine penalty liability) | | | |
| _{7.} 6015 Harr | is Parkway, Suite 120, Fort | | | | |
| | (Principal office add | • | | | |
| PO Box 10 | 6015, Fort Worth, TX 76162 | <u> </u> | | | |
| | (Current mailing add | dress) | | | |
| | Sales, Training, Support | 1 | | | |
| (Purpose(| s) of corporation authorized in home state or co | ountry to be carried out in state of Plorida) | TA'S | 69 | |
| 9. Name and street | et address of Florida registered agent: (P.C | O. Box <u>NOT</u> acceptable) | E 8 | 08 001 17 | |
| Name: | InCorp Services, Inc. | | 表質 | | 77 |
| (thitle, | | - | | | |
| Office Address: | 17888 67th Court North | | | PK 12: 09 | 0 |
| | Loxahatchee | ., Florida 33470 (Zip code) | SAS ASS | 5 | |
| | (City) | (Zip code) | 南南 | 9 | |
| 10. Registered ag | gent's acceptance: | | | | |
| Having been nam designated in this | ed as registered agant and to accept xervi application. I hereby accept the appoint | ice of process for the above stated corporational agree to act is | lon of the pl | ace Mare | |
| further agree to co | omply with the provisions of all statutes r | elative to the proper and complete perform | i inis capaci iance of my | ty. 1 duties, | |
| and I am familiar | with and accept the obligations of my po | sition as registered agent | · | | |
| | ~ ~ ~ | | | , | |
| | Sance Hull | on behalf of Incorp Se | ervices | ; In | C, |
| 7, | (Registered agent's signature) | 1 | | , | - |
| 11. Attached is a c | certificate of existence duly authenticated. | not more than 90 days prior to delivery of t | ihis ap o licati | ion to | |
| the Department of | State, by the Secretary of State or other of | fficial having custody of corporate records i | n the jurisdi | ction | |

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

| A. DIRECTORS | | | |
|--|------------------|-----------|-------------|
| Chairman: Steve Tunstal | | | |
| Address: Wallingford Software, Ltd | | | |
| Howbery Park, Walllingford, Oxon OX10 8BA | | | |
| Vice Chairman: | | | |
| Address: | | | |
| | | | |
| Director: John Ormstron | | | |
| Address: Wallingford Software, Ltd | | | |
| Howbery Park, Walllingford, Oxon OX10 8BA | | | |
| Director: Nichole Norris | | | |
| Address: Wallingford Software, Ltd | | | |
| Howbery Park, Walllingford, Oxon OX10 8BA | | | |
| B. OFFICERS | TALL TALL | 13080 | |
| President: Thomas C Davies | AHASE AHASE | | 17 |
| Address: 6015 Harris Parkway, Suite 120 | ŭ. Ç | 70 | |
| Fort Worth, TX 76132 | | <u>12</u> | |
| Vice President: | DA F | 60 | |
| Address: | | | |
| rudiyəs, | | | |
| Secretary: John Ormston | | | |
| Address: Howbery Park, Walllingford, Oxon OX10 8BA | | | |
| Freasurer: | | | |
| Address: | | | |
| | | | |
| NOTE: If necessary, you may attack an addendum to the application listing additional officers | and/or directors | s. | |
| 13. Stomas C. Louis | | | |
| (Signature of Director or Officer listed in number 12 of the application) 14. Thomas C Davies, PE President | | | |
| (Typed or printed name and capacity of person signing application) | | | |
| | | | |

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Hope Andrade Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Incorporation for Wallingford Software, Inc. (file number 800008290), a Domestic For-Profit Corporation, was filed in this office on September 06, 2001.

It is further certified that the entity status in Texas is in existence.



In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Scal of State at my office in Austin, Texas on September 12, 2008.



Hope Andrade Secretary of State

Phone: (512) 463-5555 Prepared by: Victoria Nunez Come visit us on the internet at http://www.sos.state.tx.us/ Fax: (512) 463-5709 TID: 10264

Dial: 7-1-1 for Relay Services Document: 229438240002