

To:
Subject: 000631.99555
Division of Corporations

F0900000512

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Florida Department of State
Division of Corporations
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Electronic Filing Cover Sheet

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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To: Division of Corporations
Fax Number : (850) 617-6381

PLEASE GIVE ORIGINAL SUBMISSION
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From: Account Name : CORPDIRECT AGENTS, INC.
Account Number : 110450000714
Phone : (850) 222-1173
Fax Number : (850) 224-1640

2/4/09

000631.99555

FOREIGN PROFIT/NONPROFIT CORPORATION

IP NETWORKED SERVICES, INC.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

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DEPARTMENT OF STATE
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J. Shivers
FEB 10 2009

To:
Subject: 000631.99555

From: Ricky Soto

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850-617-8381

2/9/2009 12:05

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Florida Dept of State



February 9, 2009

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORPDIRECT AGENTS, INC.

SUBJECT: IP NETWORKED SERVICES, INC.
REF: W09000006221

PLEASE GIVE ORIGINAL SUBMISSION
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We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

If you have any further questions concerning your document, please call (850) 245-6929.

Justin M Shivers
Regulatory Specialist II
New Filing Section

FAX Aud. #: H09000026039
Letter Number: 009A00004507

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2/4/09

PLEASE GIVE ORIGINAL SUBMISSION
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2/4/09

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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. IP NETWORKED SERVICES 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. Delaware 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. October 4, 2006 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. One ADP Blvd., Roseland, NJ 07068
(Principal office address)

Same as above
(Current mailing address)

8. To provide hosted IP telephone services to automotive dealers
(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: NRAI Services, Inc.
Office Address: 2731 Executive Park Dr., Ste 4
Weston, Florida 33331
(City) (Zip code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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.

NRAI Services, Inc.


(Registered agent's signature) By: Theresa Festa, Asst. Secty.

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.

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

A. DIRECTORS

Chairman: See attached list

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____


Treasurer: _____

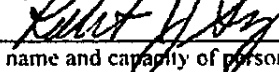
Address: _____

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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. Robert J. Singer, Asst. Secty. 
(Typed or printed name and capacity of person signing application)

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IP NETWORKED SERVICES INC.

OFFICERS

James B. Benson	One ADP Blvd., Roseland, NJ 07068	Pres./Secty.
Raymond L. Colotti	One ADP Blvd., Roseland, NJ 07068	VP/Treas.
Thomas DeLorenzo	One ADP Blvd., Roseland, NJ 07068	Asst. Secty.
Charles Gibbons	One ADP Blvd., Roseland, NJ 07068	Asst. Secty.
Robert J. Singer	One ADP Blvd., Roseland, NJ 07068	Asst. Secty.

DIRECTORS

James B. Benson	One ADP Blvd., Roseland, NJ 07068
Raymond L. Colotti	One ADP Blvd., Roseland, NJ 07068

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Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "IP NETWORKED SERVICES 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 FOURTH DAY OF FEBRUARY, A. D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "IP NETWORKED SERVICES INC." WAS INCORPORATED ON THE FOURTH DAY OF OCTOBER, A. D. 2006.

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

4230102 8300

090100307

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7117304

DATE: 02-04-09

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