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SECRETARY OF STALE
ANASSEE, FLORIDA

W09-5267 WH

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Bomgar Corporation	
	tion - must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," and check are submitted to transact business in Florida.	or Authorization to Transact Business in Florida," o register the above referenced foreign corporation to
Please return all correspondence concerning this mat	ter to the following:
Andrea Thornton	
(Name	of Person)
Bomgar Corporation	
(Firm/	Company)
578 Highland Colony Parkway, Suit	e 300
(Ac	ddress)
Ridgeland, MS 39157	
(City/Stat	te and Zip code)
For further information concerning this matter, please	e call:
Andrea Thornton at (601	չ 519-0115
	ra 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 & \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy



February 3, 2009

ANDREA THORNTON 578 HIGHLAND COLONY PARKWAY, SUITE 300 RIDGELAND, MS 39157

SUBJECT: BOMGAR CORPORATION

Ref. Number: W0900005267

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.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6962.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 109A00003857

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	orporation orporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"	,
inc., Co., C	orp," "Inc," "Co," or "Corp.")	
	·	
(If name unavail	able in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	•
Mississipp	oi 3. 20-4000074	
State or country	under the law of which it is incorporated) (FEI number, if applicable)	
6/28/2005	_{5.} perpetual	
(Date	of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	1
7/15/2008		
	(Date first transacted business in Florida, if prior to registration)	•
570 Highle	(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
376 Figilia	and Colony Parkway, Suite 300, Ridgeland, MS 39157	
570 Liable	(Principal office address)	
376 Highia	and Colony Parkway, Suite 300, Ridgeland, MS 39157 (Current mailing address)	
	(Current maning address)	•
Have hire	d Florida resident as an employee (7/15/08 hire date)	09
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	-TI
Name and stree	et address of Florida registered agent: (P.O. Box NOT acceptable)	E8 2
	NRAI Services, Inc.	S ;
Name:	NIVAI Services, IIIC.	-X
ffice Address:	2731 Executive Park Drive, Suite 4	ယ္
	Weston Florida 33331	::C3
	(City) (Zip code)	

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.

(Registered agent's signature) Xonda Diven, Assistant Secretan

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.

APPROVED AND FILED

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

09 FEB 25 PM 3: 57

A. DIRECTORS	SECRETARY OF STATE
Chairman: Joel Bomgaars	TALL AHASSEE, FLORIDA
Address: 578 Highland Colony Parkway, Suite 300	. Parent see
Ridgeland, MS 39157	
Vice Chairman: n/a	
Address:	
Director: n/a	
Address:	
Director: n/a	
Address:	
B. OFFICERS	
President: n/a	
Address:	
Vice President: n/a	
Address:	
In all Damana and	
Secretary: Joel Bomgaars	
Address: same as above	
Treasurer: Joel Bomgaars	
Address: same as above	
NOTE: If necessary, you may attach an addendum to the application listi	ng additional officers and/or directors.
13.	
(Signature of Director or Officer listed in number 1:	2 of the application)
(Typed or printed name and capacity of person sig	gning application)

State of Mississippi

Office of the Secretary of State C. Delbert Hosemann, Jr., Secretary of State Jackson, Mississippi

CERTIFICATE

I, C. DELBERT HOSEMANN, JR., Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on June 28, 2005, the State of Mississippi issued a Charter/Certificate of Authority to:

BOMGAR CORPORATION

That the state of incorporation is MISSISSIPPI.

That the period of duration is perpetual.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

Given under my hand and seal of office February 20, 2009

C. Delbert Hosemann, Jr. Secretary of State

Certification Number: 10855943-1 Page 1 of 1 Reference:

Verify this certificate online at https://secure.sos.state.ms.us/busserv/corp/soskb/verify.asp