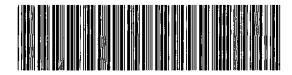
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Special Instructions to	Filing Officer:	-

Office Use Only .



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O9 JUN 29 PH 3: 40
SECRETARY OF STATE

MR /30

11109-28724

COVER LETTER

TO:	New Filing Se Division of Co		•		
SUBJ	ECT: Avolve	e Software Corp.			
	 _	Name of cor	poration	- must include suffix	
Dear S	ir or Madam:				•
"Certif					act Business in Florida," need foreign corporation to
Please	return all corres	pondence concerning thi	s matter	to the following:	
		An	anda t	teiple	·
		<u> </u>	lame of 1	Person	
		Avolve	Softw	are Corp.	
	· · · · · · · · · · · · · · · · · · ·		m/Com		
		4835 Fast C	actus i	Road Suite 420	•
		1000 Cust C	Addre		
		Scotts	alehs	Z 85254	
				nd Zip code	
		•		oftware.com	
	· — · — —	E-mail address: (to)	or used i	or future annual report	notification)
For fu	rther information	concerning this matter,	please c	all:	
			000	222 2474	•
Amai	nda Heiple Name of Person	at (602	903-3174 Code & Daytime Telepi	han Number
	Name of Perso	OB	Area	sode & Dayume Telepi	note rumber
	STREET/CO	URIER ADDRESS:		MAILING A	ADDRESS:
	New Filing Se		٠.	New Filing S	
	Division of Co			Division of C	
	Clifton Buildie	•		P.O. Box 632 Tallahassee,	
•	Tallahassee, F	e Center Circle L 32301		i alii anaasee,	FL 32314
Enclos	•	r the following amount:			
				,	
<u></u> \$7€	0.00 Filing Fee	\$78.75 Filing Fee & Certificate of State		\$78.75 Filing Fee & Certified Copy	✓ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 19, 2009

AMANDA HEIPLE AVOLVE SOFTWARE CORP. 4835 EAST CACTUS ROAD, SUITE 420 SCOTTSDALE, AZ 85254

SUBJECT: AVOLVE SOFTWARE CORP.

Ref. Number: W09000028724

We have received your document for AVOLVE SOFTWARE CORP. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$2,300.00.

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.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap Regulatory Specialist II

Letter Number: 309A00020941

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.

	ible in Florida, enter alternate corporate name	edopted for the purpose of transacting business in Florida)
Delaware		26-4081788
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)
August 8, 20		Perpetual
-	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
January 1, 2		
		in Florida, if prior to registration) 502, F.S., to determine penalty-liability)
4825 Engt Co		• • • •
4033 E881 CE	ctus Road Suite 420, Scottsdale, /	
4925 East C		•
4030 East Ca	actus Road Suite 420, Scottsdale, A (Current mailing add	
Software De	velopment, and Training	
	of corporation authorized in home state or co	nuntry to be carried out in state of Florida)
		O. Box NOT accentable)
Name and street	t address of Florida registered agent: (P.0	
	t address of Florida registered agent: (P.C	TEG 1
Name and street	taddress of Florida registered agent: (P.0 NRAI Services Inc.	- LLCARE
Name:		ECAHASI 4
Name:	NRAI Services Inc.	4 Florida 33331
Name:	NRAI Services Inc. 2731 Executive Park Drive, STE	4 PH 29 PH 3
Name: ffice ∧ddress:	NRAI Services Inc. 2731 Executive Park Drive, STE Weston (City)	4 LLAHASSEE FLOR (Zip code)
Name: ffice ∧ddress:). Registered a	NRAI Services Inc. 2731 Executive Park Drive, STE Weston (City)	4 LLAHASSEE FLORI (Zip code)
Name: Plice Address: D. Registered appropring been name	NRAI Services Inc. 2731 Executive Park Drive, STE Weston (City) gent's acceptance: ed as registered agent and to accept services	Florida 33331 (Zip code) Give of process for the above stated corporation in the planement as registered agent and agree to act in this capacity

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.

Jun 17 2009 13:37 HP LASERJET FAX

FILED

09 JUN 29 PM 3: 40 12. Names and business addresses of officers and/or directors: A. DIRECTORS SECRETARY OF STATE TALLAHASSEE FLORIDA Chairman: Gary Heath Address: 4835 East Cactus Road Suite 445, Scottsdale AZ 85254 Vice Chairman: Address: _ Director: Address: Director: Address: _ B. OFFICERS President: Ronald Loback Address: 4835 East Cactus Road Suite 420, Scottsdale, AZ 85254 Vice President: Address: Scoretary: Carl Strain Address: 4835 East Cactus Road Suite 445, Scottsdale AZ 85254 Treasurer. Address: NOTE: If necessary, you may attach an addengum 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)

14. Ronald Loback

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "AVOLVE SOFTWARE CORP." 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 TWENTY-THIRD DAY OF JUNE,

A.D. 2009.



4411457 8300

090642181

AUTHENTY CATION: 7379558

DATE: 06-23-09

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