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(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
<u></u>	WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
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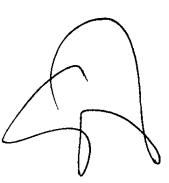
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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Systems Integration Plus, 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," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.	19
Please return all correspondence concerning this matter to the following:	
Jeanne Love, Controller	
Name of Person	
Systems Integration Plus, Inc.	
Firm/Company	
8221 E Evans Road	
Address	
Scottsdale, AZ 85260	
City/State and Zip code	
jal@vme.com ⁻	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Jeanne Love _{at (} 480) 513-8979 ext 100	
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 & □ \$78.75 Filing Fee & □ \$87.50 Filing Fee & Certificate of Status Certified Copy 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. SYSTEMS I	NTEGRATION PLUS, INC.		
	orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"
(If name unavaila	able in Florida, enter alternate corporate na	me	adopted for the purpose of transacting business in Florida)
Arizona	,	3	96 0651260 E
····	under the law of which it is incorporated)	_	(FEI number, if applicable)
_{4.} Nov. 17,	1989	5.	perpetual Samuel
' -	of incorporation)	٠.	(Duration: Year corp. will cease to exist or "perpetual")
_{6.} 01-01-20	14		
	(Date first transacted busine (SEE SECTIONS 607.1501 & 60	7.1	in Florida, if prior to registration) 502, F.S., to determine penalty liability)
_{7.} 8221 E E\	ans Rd, Scottsdale, AZ	8	B 526 0
	(Principal office	adc	dress)
8221 E Ev	vans Rd, Scottsdale, AZ 8	85	5260
	(Current mailing	ado	lress)
	d service of computer sy		
(Purpose(s) of corporation authorized in home state o	r c	ountry to be carried out in state of Florida)
9. Name and stree	et address of Florida registered agent:	(P.	O. Box NOT acceptable)
Name:	John Marceca		
Office Address:	114 East Lake Ave.		
	Aurburndale		. Florida 33823
	(City)	-	(Zip code)
10. Registered as	gent'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.

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: Vice Chairman: Address: **B. OFFICERS** President: Gunnar Buzzard Address: 9245 E Sierra Pinta Drive Scottsdale, Arizona 85255 Vice President: Patrick Riordan Address: 6109 E. Waltann Ln. Scottsdale, Arizona 85254 Address: _____ Treasurer: Address: ____ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. 14. Gunnar Buzzard, President

(Typed or printed name and capacity of person signing application)





STATE OF ARIZONA



Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

To all to whom these presents shall come, greeting:

I, Jodi A. Jerich, Executive Director of the Arizona Corporation Commission, do hereby certify that

***SYSTEMS INTEGRATION PLUS, INC. ***

a domestic corporation organized under the laws of the State of Arizona, did incorporate on November 17, 1989.

I further certify that according to the records of the Arizona Corporation Commission, as of the date set forth hereunder, the said corporation is not administratively dissolved for failure to comply with the provisions of the Arizona Business Corporation Act; and that its most recent Annual Report, subject to the provisions of A.R.S. sections 10-122, 10-123, 10-125 & 10-1622, has been delivered to the Arizona Corporation Commission for filing; and that the said corporation has not filed Articles of Dissolution as of the date of this certificate.

This certificate relates only to the legal existence of the above named entity as of the date issued. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's condition or business activities and practices.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of the Arizona Corporation Commission. Done at Phoenix, the Capital, this 20th Day of May, 2014, A. D.



Jodi A. Jerich, Executive Director

v: 1067637