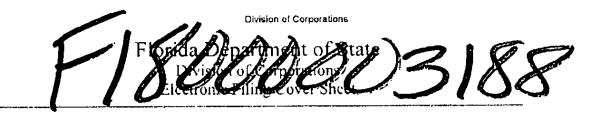
7/11/2018



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000202005 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : BURR & FORMAN LLP Account Number : 119990000278

: (407)540-6600 Phone : (407)540-6601 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

dave.graham@cmap-software.com Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION

CMAP Software Inc.

Certificate of Status	0
Certified Copy	0
l'age Count	01
Estimated Charge	\$70.00

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Help

(((H18000202005 3)))

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPILANCE WITH SECTION 607,1503. FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. CMAP Software in the Control of t	ing. rporation; must include "INCORPORATED. rp," "Bic." "Co," or "Corp.")	" "COMPANY," "CORPORATION,"	
inc., csa, ca	in the state of the state of		
(If name unavaila	ble in Florida, enter alternate corporate name	adopted for the purpose of transacting but	siness in Floridz)
n Delawara	3	61-1855503	
(State or country	under the law of which it is incorporated)	(FEI number, if applica	ible)
4 September 1, 20	517 5		
•••	of incorporation)	(Date of duration, if other than	perpetual)
6.			<u> </u>
•		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	SECR 2
7, 300 S. Orange Av	e Suite #1000, Orlando, Florida 32801		
	(Princ	ipal office address)	E C
	(Current mail	ling address, if different)	THOSE OF
8. Name and street	t address of Florida registered agent: (P	O. Box NOT acceptable)	\$ 53
Name:	Registered Agents Inc.	***	,
Office Address:	3030 N. Rocky Point Dr. STE 150A	····	
	Татра	, Florida 33607	
	(City)	(Zip code)	
designated in this	ent's acceptance: led as registered agent and to accept ser application, I hereby accept the appoin amply with the provisions of all statute: familiar with and accept the obligations	itment as registered agent and agree t s relative to the proper and complete p	to act in this capacity. I
	1	Registered Agents Inc.	

Bill Havre

(Registered agent's signature)

under the law of which it is incorporated.

10. 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

- Assistant Secretary

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11. Name	es and business addresses of officers and/or directors:		
A. DIRECTORS			
Chairman:			
Address			
-			
Vice Chai	man:		
Address:			
-			
Director:	David Graham		
Address:	300 S. Orango Ave Suita #1000, Orlando, Florida 32801		
Director:			
Address:			
B. OFF	1 30 1		
President:	Devid Graham		
Address:	300 S Orango Ave Suite #1000, Ortendo, Florida 32801		
Vice Pres	ident:		
Address:	10 × 3		
Secretary:			
Address:			
	If necessary, you may attach an addendum to the application listing additional officers and/or directors.		
12). 		
are true :	Signature of Director or Officer cer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein and that he or she is aware that false information submitted in a document to the Department of State constitutes egree felony as provided for in s.817.155, F.S.		
13. <u>Dav</u>	vid Graham, President		
	(Typed or printed name and capacity of person signing application)		

(((H18000202005 3)))



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CMAP SOFTWARE 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 ELEVENTH DAY OF JULY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CMAP SOFTWARE INC." WAS INCORPORATED ON THE FIRST DAY OF SEPTEMBER, A.D. 2017.

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

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

6529874 8300

SR# 20185607326

Authentication: 203043946

Date: 07-11-18