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TRANSMITTAL LETTER



TO: QUALIFICATION/TAX LIEN SECTION DIVISION OF CORPORATIONS

| SUBJECT: PHILAD INC. (Name of corporation - must include suffix) | 02/14/95 ±****70.00 | -01035004) *****70.00 |
|--|-------------------------|--|
| Dear Sir or Madam: | | |
| The enclosed "Application by Foreign Corporation for Authorization to Florida", "Certificate of Existence", and check are submitted to register foreign corporation to transact business in Florida. | Transact I the above | Business in referenced |
| Please return all correspondence concerning this matter to the following: | | |
| (Name of Person) (Name of Person) (PITECH, INC. (Firm/Company) (IS AICOCOL AVE (Address) Altonomy (Spring, FL 32) [4] (City, State and Zip Code) | tt 2/14 | FILED SECRETARY OF STATE DIVISION OF COLFGRATIONS 95 FEB 14 PH 3: 12 |
| Should you need to call someone concerning this matter, please call: | | |
| Name of Person) at (407) 862 - 788 6. Area Code & Daytime Telephone Number | ar | |

COURIER ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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:

| IName of corporation: must include abbreviations of like import in languor partnership if not so contained in | (' I the word "NCORPORATED", "COMPANY", "CORPORA lage as will clearly indicate that it is a corporation insteat the name at present.) | TION or words d of a natural p | or or |
|---|---|-----------------------------------|---|
| 2. Indialia (State or country under the law of w | 3 | | |
| 4. X(PYY)XY 4 C(C) | Duration: Year corp. will cease to exis | t or "nornatual" | |
| 6. Japuary Luc | Orida. (See sections 607.1501, 607.1502, and 817.155, F.S.) | Corporation (Corporation) | , SMS (4) |
| ALIANONIC GORLI | KIS (1 32:115) t mailing address) | 12 PH | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| 8. Administration author | (| <u>ب</u> | 27.17 |
| | of Florida registered agent: | JID OT FIONGO | Ž, |
| Office Address: <u>니</u> 안 | MOQZA I AUCHLIC LINCHE COLLIGO, Florida, E | garret. | |
| | | (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)

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.

| ١. | DIRECTORS | |
|-----------------|--------------------------|---|
| | Chairman: | |
| | Address: | |
| | Vice Chairr | man: |
| | Address: _ | |
| | Director: | |
| | Address: _ | |
| | - Director: | |
| | Address: _ | |
| 3. | OFFICERS - | |
| | President: | Hoyl A Byrum |
| | | P.O. PLY 345 |
| | _ | Preschin IN 465162 |
| | Vice Presid | lent: |
| | Address: _ | |
| | Secretary/ | Treasurer: Johnsfor Meyer |
| | | 418 MOOZOF AVENUE |
| | Treasurer: | Altainante Springs, FL 32714 |
| | Address: | |
| | | |
| | : If necessary, you n | nay attach an addendum to the application listing additional officer. |
| 3. [/] | Jan 1105 41) | Chairman, or any officer listed in number 12 of the application) |
| J | anatura of Chairman Vice | Chairman, or any officer listed in number 12 of the application) |

14.

STATE OF INDIANA

OFFICE OF THE SECRETARY OF STATE

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetimit

I, SUF ANNE CILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

EPITECH, INC.

filed Articles of Incorporation on December 04, 1992, and is a corporation duly organized and existing under and by virtue of the laws of the State of Indiana.

I further certify this corporation has files its most recent annual report required by Indiana law with the Secretary of State, or is not yet required to file such annual reports, and that Articles of Dissolution have not been filed.

SECRETATIONS
ONVERTAL COMPONING

In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this First day of February, 1995

in Arm School

SUE ANNE GILPOY, Secretary of State

Dy Wroter & Prolin

Deputy

