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TO: QUALIFICATION/REGISTRATION SECTION DIVISION OF CORPORATIONS	\$100001 -04/21/95 *****78.75	1. 45 2563 01083004 ******78.75
SUBJECT: Net RUNNER Inc (Name of corporation)		
Dear Sir or Madarn:		
The enclosed "Application by Foreign Corporation for Authorization Florida", "Certificate of Existence", and check are submitted to regist foreign corporation to transact business in Florida.	to Transact I er the above	Business in referenced
Please return all correspondence concerning this matter to the following	,.	
Mark Cole (Name of Person) NET Runner Inc (Firm/Company) 12173 South Pike Hury (Address) Miami FL 33156 (City, State and Zip Code)	95 kPR 24 <i>lil</i> l 9: 59	SECRETARY OF STATE ON SIGNED AND STATE OF STATE
Should you need to call someone concerning this matter, please call: Mark Cole at (305) 155 (200)		
(Name of Person) at (305) 255 - 5800 Area Code & DayrimeTelephone Num	iber	

COURIER ADDRESS:

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

MAILING ADDRESS:

Qualification/Registration 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:

1.	METRUNNER Inc.	Üi	¥SE SE
	Name of corporation: must include the word INCORPORATED, COMPANY, CORPORATION abbreviations of like import in location as well global indicated.	or words	or.
	(Name of corporation: must include the word INCORPORATED", "COMPANY", CORPORATION abbreviations of like import in language as will clearly indicate that it is a corporation instead of a or partnership if not so contained in the name at present.)	naturalijoe	rson
			S:
2.	<u>Deleware</u> 3 65-0568700		- 135 - 135
(Delewaye. (State or country under the law of which it is incorporated) (FEI number, if applicable)	<u>9</u>	<u></u>
4.	(Date of Incorporation) 5. Perpetus (Duration: Year corp. will cease to exist or 3)	9	SHOT!
	(Date of Incorporation) (Duration: Year corp. will cease to exist or	perpetuail	
6.	APRIL 95		
	(Date first transacted business in Ficrida. (See sections 607.1501, 607.1502, and 817.155, F.S.)		
7.	12173 South Dixie Kwy		
	· · · · · · · · · · · · · · · · · · ·		
	MIAMI FC 33156		
	(Current mailing address)		
3.	Computer Networking Services (Purpose(s) of corporation authorized in home state or country to be carried out in the state of		
	(Purpose(s) of corporation authorized in home state or country to be carried out in the state of	Floridal	_
		, 101100,	
€.	Name and street address of Florida registered agent:		
	Name: Mark L. Cok		
	Office Address: 7690 SW 153 ST		
	miami, Florida, 3315	- ->	
		Code)	_
_	(2ip)	COGE!	
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10. Registered agent's acceptance:

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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)

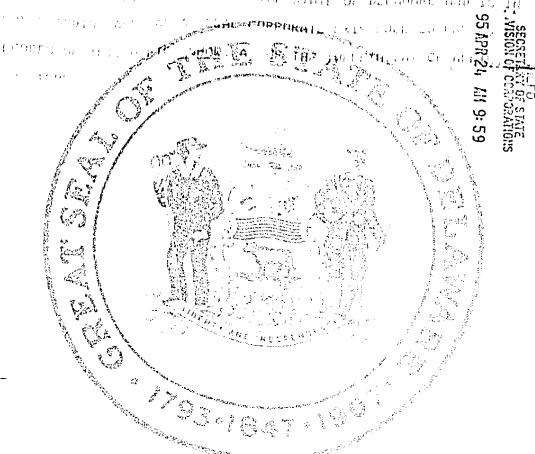
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: DIRECTORS Chairman: Mark L. Cole Address: 12173 S Dika Nishwan FC 33554 MIAMI Vice Chairman: Address: Director: ____ Address: Director: Address: **OFFICERS** B. President: Address: Vice President: Address: Secretary: Address: Treasurer: _ Address: ___ NOTE: If necessary, you may attach an addendum to the application listing additional officers Vice Chairman, or any officer listed in number 12 of the application)

MARK L. COLE

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

1, EDUARD J. PREEL, SECRETARY OF STATE OF THE STATE OF TH





Edwal Srul

Edward J. Freel, Secretary of State

AUTHENTICATION:

DATE: