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TALLAHASSEE, FL 32304
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904-222-5777 FAX

800-342-8086

CSC networks
PRENTICE HALL
LEGAL & FINANCIAL SERVICES

95 APR 28 PM 4:22
DIVISION OF CORPORATION

ACCOUNT NO. : 072100000032
REFERENCE : 587134 86901A
AUTHORIZATION : *Patricia Pizich*
COST LIMIT : \$ 70.00

ORDER DATE : April 28, 1995

ORDER TIME : 11:35 AM

ORDER NO. : 587134

CUSTOMER NO: 86901A

300001468723

CUSTOMER: Ms. Lisa Zerbano
Prentice Hall Legal &
84 State Street
Boston, MA 02109

FOREIGN FILINGS

NAME: GULF COMPUTERS, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
MAY -1 AM 10:03
1/529

XX PROFIT _____ CORPORATE
NON-PROFIT _____ LIMITED PARTNERSHIP

XX QUALIFICATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Debbie Skipper

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACTION BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACTION BUSINESS IN THE
STATE OF FLORIDA:

1. Gulf Computers, Inc.

(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Massachusetts

(State or country under the law of which it is incorporated)

3. applied for

(FEI number, if applicable)

4. July 3, 1992

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. upon qualification

(Date first transacted business in Florida. (See sections 607.1801, 607.1502, and 617.186, F.S.))

7. 239 Littleton Road, Suite 8D

Westford, Massachusetts 01886

(Current mailing address)

To engage in retail and wholesale sales of computer software whether

8. developed or acquired and accessory equipment thereto. To conduct

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

sales or services in any state or territory of the U.S. and foreign country.

9. Name and street address of Florida registered agent:

The Prentice-Hall Corporation

Name: System, Inc.

Office Address: 1201 Hays Street, Suite 105

Tallahassee

Florida, 32301

(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.

The Prentice-Hall Corporation System, Inc.

By: [Signature]

RIGGAT PORCELLI

Assistant Secretary

(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.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY 1 AM 10:04

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Suresh Mani

Address: 43 Adria Way

Weymouth, MA 02190

Director: Maria Mani

Address: 43 Adria Way

Weymouth, MA 02190

B. OFFICERS

President: Suresh Mani

Address: 43 Adria Way

Weymouth, MA 02190

Vice President: _____

Address: _____

Clerk: Maria Mani

Address: 43 Adria Way

Weymouth, MA 02190

Treasurer: Maria Mani

Address: 43 Adria Way

Weymouth, MA 02190

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.


(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14.

Suresh Mani, President

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



William Francis Galvin
Secretary of the
Commonwealth

The Commonwealth of Massachusetts

Secretary of the Commonwealth

State House, Boston, Massachusetts 02133

April 21, 1995

TO WHOM IT MAY CONCERN:

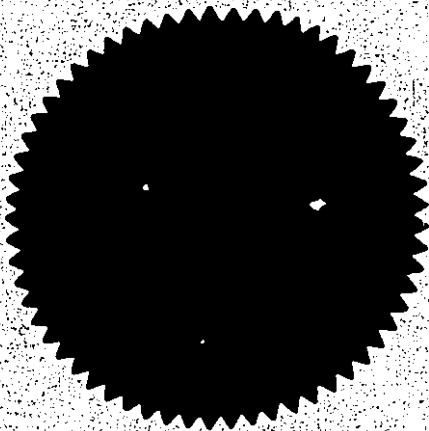
I hereby certify that according to the records of this office

Gulf Computers, Inc.

is a domestic corporation organized on July 3, 1992, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156B section 101 for said corporations dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 AM 10:09



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

William Francis Galvin

Secretary of the Commonwealth

* This certificate is not a tax clearance. Certificates certifying that all taxes due and payable by the corporation have been paid or provided for are issued by the Department of Revenue.

DEG

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

56 OCT 17 PM 12:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F95000002108**

1. Corporation Name

GULF COMPUTERS, INC.

Principal Place of Business

239 LITTLETON RD. SUITE 80
WESTFORD MA 01886

Mailing Address

239 LITTLETON ROAD, SUITE 80
WESTFORD MA 01886

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, if Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT 96 ew

4. Date Incorporated or Qualified
To Do Business in Florida

05/01/1966

5. FEI Number

04-3173861

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PD	MANI, SURESH	43 ADRIA WAY	WEYMOUTH MA 02190
CTD	MANI, MARIA	43 ADRIA WAY	WEYMOUTH MA 02190

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-10/23/96--01059--009
###383.75 ###383.75

8. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET, SUITE 105
TALLAHASSEE FL 32301

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

10/14/96

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☐

(See other side for information
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE OF SURESH MANI
SIGNATURE ADAPTED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10-4-96 508-392-3400