June 9, 1995 THE SOM PANY CORPORATION Stephology 57 04 5 5 5 6 1346

Corporate Records Bureau Division of Corporations PO Box 6327 Tallahassee, Fl 32314

RE: Niche Software Inc. 9502152480538

100001518361 -06/20/95--01117--014 ******70.00 ******70.00

Dear Sir or Madam:

Enclosed please find:

- -application for Authority
- -Certificate of Good Standing
- -payment of \$70.00

Please file and return all related correspondence to my attention at the address listed above.

Please feel free to contact me directly at 1-302-575-0440, with questions regarding the enclosed application.

Sincerely,

Susan P. Rosenthal

Corporate Service Representative

enc.

SECRETARY OF STATE STATE OF CORPORATIONS

95 JUH 16 AH 8: 19

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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

1.	NICHE SUFTWARE 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.				
۱	State or country under the law of which it is incorporated) (FEI number, if applicable)			
٠	(Date of Incorporation) (Duration: Year corp) will cease to exist or "perpetual")			
6.	- UPN GOALIFI CATION : 5 BB			
• (Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.)			
/.	On m			
	Pompano PL 33069 = PON SAN SAN SAN SAN SAN SAN SAN SAN SAN SA			
8.	(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)			
_				
9.	Name and street address of Florida registered agent:			
	Name: LAILY Wolte			
	Office Address: 200 A JOHN KNOX RO			
	TA LANASSEE MARINE 32303			
	(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 6	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. Name	es and addresses of officers and/or directors: (Stress CMLY- P. O. Box NOT acceptable)	reet
A. DIN	ECTORS (Street address only- P. O . Box NOT acceptable	le)
Chairman:	JUN SILING	, •
Address:	4342 NW 51 CT	-
	COCONUT Creek PL 33073	
Vice Chair		
	rman:	
vooress: -		 ,
	ហ័ា	<u></u>
		<u> </u>
Address: _		- CE T
_	<u> </u>	— ĕĭĭm
Director:		F ST POR
Address: _	<u> </u>	
		ហ់ 🦠
B. OFFICERS	(Street address only- P. O. Box NOT acceptable)	-
President:	7. N C. II.	
	4342 NW 5187 CT	
_		
. —	CoCowd CK FL 33073	
Vice Presi	dent:	
Address: _		
		<u> </u>
Secretary:	DON SILING	-
Address:	4342 NW 51'CT	
	COCONUT Creck FL 33073	
Treasurer:	1	 .
Address:		
NOTE: If I	necessarv. You may attach an addendum to the annlicat	ion
listing ad	necessary, you may attach an addendum to the applicat ditional officer and or directors.	+011
13. <u>(Sign</u>	XI VICE CONTRACTOR VICE CONTRA	
_	12 of the application))er
14.	d or printed name and capacity of person signing application)	_
(+ype	a or himse news and cabacity of barson signing application)	

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICLE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON PROCESS MAY BE SERVED.

Having been named to accept service of process for the above stated corporation, at the place designated in this Certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

Larry Wolfe

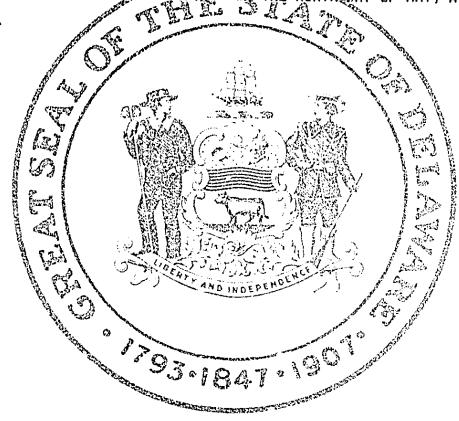
Date

State of Delaware

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREDY CERTIFY "NICHE 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 WAS OF THE NINTH DAY OF MAY A D

1995.



SECRETARY OF STATE DIVISION OF CORPORATION

Edward J. Freel, Secretary of State 7498893

AUTHENTICATION:

05-09-95

DATE:

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