

COMPANY CORPORATION

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Corporate Records Bureau Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: O-bau Inc. 9506092514319

500001627285 -11/03/95--01022--011 *****70.00 *****70.00

Dear Sir or Madam:

Enclosed please find Application for Authority (and related documents, if appropriate) and our check in the amount of \$70.00 for O-bau Inc.

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, ext. 7003, with questions regarding the enclosed application.

Sincerely,

" While point

Vickie Joyner Corporate Service Representative

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enc.

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:

1O-bau Inc.	
1. O-bou oc. (Name of corporation: must include the word "INCORPORABLE abbreviations of like import in language as will clearly indices person or partnership if not so contained in the name at pre-	RATED", "COMPANY", "CORPORATION" or words or cute that it is a corporation instead of a natural sent.)
2. Delaware (State or country under the law of which it is incorporated)	3. 59-333 1902 (FEI number, if applicable)
4. June 9 1995 (Date of Incorporation)	5. Percetual (Duration: Year corp. will cease to exist or "perpetual")
6. (Date first transacted business in Florida. (SEE SECTION	· 17 · 95 s 607.1501, 607.1502, AND 817.155, F.S.)
7. 10150 Belle Rive Blud	Apt. 610
JAKSONVILLE FLORIDA (Current maili	32256 3 = 3
	20
8. Computer software developm (Purpose(s) of corporation authorized in home state or countrible Florida)	nent systems architect contractor ry to be carried out in the state of
9. Name and street address of Florida registered acceptable)	
Name:	
Office Address:	King !
- Tall alice Ge	, Florida ,
10. Registered agent's acceptance:	(Zip Code)
Having been named as registered agent and to acce corporation at the place designated in this applicant registered agent and agree to act in this capacity. I all statutes relative to the proper and complete perfo and accept the obligations of my position as register	Juriner agree to comply with the provisions of
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(Registered agen	('s signature)
 Attached is a certificate of existence duly authen delivery of this application to the Department of official having custody of corporate records in the 	ticated, not more than 90 days prior to State, by the Secretary of State or other e jurisdiction under the law of which it is

incorporated.

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable) A. DIRECTORS (Street address only- P. O . Box NOT acceptable) Chairman: Boyd Charters Address: 10150 Belle Rive Blud Apt 610 Jacksonville FL. 32256 Vice Chairman:_____ Address: Director: ____ Address: ______ B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: Year to the territory Vice President: Address: _____ Secretary: Address: _____ Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

BOYD CHARTERS Chairman

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

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

In compliance with Section 607.1507, Florida Statutes, the following is submitted:

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 Wolle

10-23-95

Date

State of Delaware Office of the Secretary of State

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95 OCT 27 FHII: 49



Ldward J. Lieel, Secretary of State

AUTHENTICATION