

120 HAYS STREET
800 780 0000
901 221 1100
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F950000.5490

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PROFESSIONAL
LEGAL & FINANCIAL SERVICES

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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. United TransNet, 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. Delaware
(State or country under the law of which it is incorporated)
3. 58-219-8204
(FEI number, if applicable)
4. October 5, 1995
(Date of Incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. Upon filing
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.))
7. 1080 Holcomb Bridge Road, Building 200, Suite 140,
Roswell, GA 30076
(Current mailing address)
8. Air and ground courier service
(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: CORPORATION SERVICE COMPANY

Office Address: 1201 Hays Street

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.

CORPORATION SERVICE COMPANY

By: [Signature]
(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:

A. DIRECTORS

Chairman: (Please see attached sheet) _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: (Please see attached sheet) _____

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. Philip A. Belyew
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application.)

14. Philip A. Belyew, President
(Typed or printed name and capacity of person signing application)

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United TransNet, Inc.

Officers

<u>Name</u>	<u>Offices</u>	<u>Address</u>
Philip A. Belyew	Chairman of the Board of Directors, President Chief Executive Officer	1080 Holcomb Bridge Road Building 200, Suite 140 Roswell, GA 30076
Ronald J. Barowski	Executive Vice President, Chief Financial Officer, Chief Accounting Officer, Treasurer, Secretary	1080 Holcomb Bridge Road Building 200, Suite 140 Roswell, GA 30076
Harvey E. Bines	Assistant Secretary	Sullivan & Worcester One Post Office Square Boston, MA 02109
Martha J. Gordon	Assistant Secretary	Sullivan & Worcester One Post Office Square Boston, MA 02109
Peter G. Johannsen	Assistant Secretary	Sullivan & Worcester One Post Office Square Boston, MA 02109

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Directors

<u>Name</u>	<u>Address</u>
Philip A. Belyew	1080 Holcomb Bridge Road Building 200, Suite 140 Roswell, GA 30076
Ronald J. Barowski	1080 Holcomb Bridge Road Building 200, Suite 140 Roswell, GA 30076

State of Delaware
Office of the Secretary of State

NOTICE IS HEREBY GIVEN THAT THE OFFICE OF THE SECRETARY OF STATE HAS RECEIVED A PETITION FOR THE RECALL OF THE GOVERNOR OF THE STATE OF DELAWARE, AND THAT THE PETITION IS NOW OPEN FOR THE SIGNATURES OF THE PEOPLE OF THE STATE. THE PETITION IS NOW OPEN FOR THE SIGNATURES OF THE PEOPLE OF THE STATE. THE PETITION IS NOW OPEN FOR THE SIGNATURES OF THE PEOPLE OF THE STATE.

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SECRETARY OF STATE



Edward J. Friel

Edward J. Friel, Secretary of State

WILMINGTON, DELAWARE

DATE

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**ARTICLES OF MERGER
Merger Sheet**

.....
MERGING:

UNITED TRANSNET, INC., a Delaware corporation F95000005490
SUNSTATE COURIER, INC., a Florida corporation F43071
COURIER DISPATCH GROUP, INC., a Delaware corporation F95000005864
CLASSIC AIR, INC., a Florida corporation 477942
CDG AVIATION, INC., a Delaware corp not authorized to transact business in Florida
COMMERCIAL COURIER EXPRESS, INC., a North Carolina corp not authorized to transact business in Florida
H & H ASSOCIATES, INC., a Georgia corp not authorized to transact business in Florida
UTN CONTRACT SERVICES, CORP., a Delaware corp not authorized to transact business in Florida

INTO

CORPORATE EXPRESS DELIVERY SYSTEMS - SOUTHEAST, INC., a Delaware corporation not qualified in Florida.

File date: July 18, 1987

Corporate Specialist: Annette Hogan

*filed to
477942*

F95000005490 STATE OF FLORIDA
OFFICE OF THE COMPTROLLER
APPLICATION FOR REFUND

Section 215.26, Florida Statutes, states in part: "Applications for refunds as provided in the Comptroller, except as otherwise provided herein, within 3 years after the right to file such right shall be barred." Three years is generally interpreted as meaning three into the State treasury. The Comptroller has delegated the authority to accept application government which initially collected the money.

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Pursuant to the provisions of Rule 3A-44.020, Florida Administrative Code, and Section 2.
Section _____, Florida Statutes, I hereby apply for a refund of moneys I paid into the
subject to refund. The following information is submitted to substantiate the claim.

to State, or
r/, which are

Name: United Transnet, Inc. EIN or SS#: _____

Address: 1080 Holcomb Bridge Road
Blg. 200, Ste 140
Roswell, Ga 30076

Amount: \$550.00 Date Paid _____

Reason for claim: Corp. merged - no AR required - F95000005490
SP1 9/8/97

Certified true and correct this 19 day of SEPTEMBER, 19 97.

Signature [Signature]

* Must be completed if authority is other than Section 215.26, Florida Statutes.

For Agency Use Only	
Agency recommends approval of above claim and submits the following information to substantiate the claim:	Amount of recommended refund \$ <u>550.00</u>
The amount requested above was originally deposited into the State Treasury as a part of the funds deposited on	
State Treasurer's Receipt No. <u>98111015</u> dated <u>09-02-97</u>	
Name of Account	<u>45202130001453000000000010000</u>
Statutory Authority for Collection	<u>607</u>
It is requested that payment be made from the following account:	
NAME OF ACCOUNT	<u>452021300014530000000022002000</u>
Certified true and correct this _____ day of _____, 19 _____	
Department of State, Division of Corporations	(Agency) (Authorized Signature and Title)