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PROVIDING
LEGAL & FINANCIAL SERVICES

ACCOUNT NO. : 072100000032

REFERENCE 727013 118692A

AUTHORIZATION: *Patricia*

COST LIMIT : 0 70.00

ORDER DATE : November 6, 1995

ORDER TIME : 3:17 PM

ORDER NO. : 727013

CUSTOMER NO: 118692A

CUSTOMER: Mr. Donald M. Ochacher
Telecom Consulting Group
1377 S.w. 12th Street

Pompano Beach, FL 33069

FOREIGN FILINGS

NAME: DMO HOLDINGS CORP.

☐ PROFIT
☐ NON-PROFIT

☐ CORPORATE
☐ LIMITED PARTNERSHIP

☐ QUALIFICATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☐ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: SEBRENA RANDOLPH

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. DNO BUILDINGS CORP.

(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words of
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 as presented)

2. DELAWARE

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

3. 65-0546750

(FBI number, if applicable)

4. 2/28/94

(Date of incorporation)

5. PERPETUAL

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

6. 11/1/95

(Date first transacted business in Florida. See sections 207.1501, 607.1502, and 607.1503, F.S.)

7. 1377 S.W. 12TH AVENUE

PUMPAHO BEACH, FL 33069

(Current mailing address)

8. ANY lawful ACTIVITY

(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.

[Signature]

(Registered agent's signature)

Authorized Representative

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

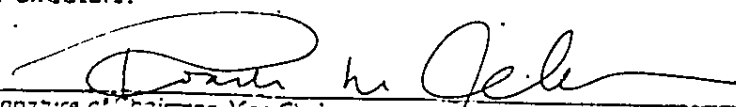
Chairman: DONALD OCHACHER
Address: 1377 SW 12th AVENUE
POMPAHO BEACH, FL 33069
Vice Chairman: MATTHEW OCHACHER
Address: 10807 PEACH GROVE ST
NO HOLLYWOOD, CA 91601
Director: _____
Address: _____
Director: _____
Address: _____

B. OFFICERS

President: DONALD OCHACHER
Address: 1377 SW 12th AVENUE
POMPAHO BEACH, FL 33069
Vice President: MATTHEW OCHACHER
Address: 10807 PEACH GROVE ST
NO HOLLYWOOD, CA 91601
Secretary: MATTHEW OCHACHER
Address: 10807 PEACH GROVE ST
NO HOLLYWOOD, CA 91601
Treasurer: DONALD OCHACHER
Address: 1377 SW 12th AVENUE
POMPAHO BEACH, FL 33069

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 this application)

14.

DONALD M. OCHACHER - CHAIRMAN
(Typed or printed name and capacity of person signing application)

State of Delaware
Office of the Secretary of State

I, the undersigned, do hereby certify that the foregoing is a true and correct copy of the original as the same appears in the records of the Office of the Secretary of State, and that the same is a true and correct copy of the original as the same appears in the records of the Office of the Secretary of State, and that the same is a true and correct copy of the original as the same appears in the records of the Office of the Secretary of State.

I do hereby further certify that the foregoing is a true and correct copy of the original as the same appears in the records of the Office of the Secretary of State, and that the same is a true and correct copy of the original as the same appears in the records of the Office of the Secretary of State, and that the same is a true and correct copy of the original as the same appears in the records of the Office of the Secretary of State.

I do hereby further certify that the foregoing is a true and correct copy of the original as the same appears in the records of the Office of the Secretary of State, and that the same is a true and correct copy of the original as the same appears in the records of the Office of the Secretary of State, and that the same is a true and correct copy of the original as the same appears in the records of the Office of the Secretary of State.



Edward H. Smith

Edward H. Smith, Secretary of State

ATTESTATION:

DATE

BY