F9600000001745

TO: Qualification/Tax Lien Section Division of Corporations		
SUBJECT: Interconnect Circu (Name of corporation -)	nust include suffix)	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation Florida", "Certificate of Existence", and check are foreign corporation to transact business in Florida.	for Authorization to Transact Busin submitted to register the above reference.	ess in enced
Please return all correspondence concerning this ma	atter to the following:	
Att: John Dema	erson)	
Interconnect (ico.	1 - 1/09/9	01682155 601025008 0.00 *****70.00
13540 Wright Circe (Address (Address (City/State	26 c/Zip) 6:	
Should you need to call someone concerning this matter, please call: at (8/3) 8/8-0888 (Name of Person) at (8/3) 8/8-0888 (Area Code & Daytime Telephone Number)		
COURIER ADDRESS:	H 1/10	DIVISION 96 JAN
Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399	Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	FILED FILED STATE FOR CORPORATION -9 AMIL: 3

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:

STATE OF FLORIDA:
1. The toccarried Circuit Time. (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. 59-3045739 (FEI number, if applicable)
4. Date of Incorporation) 5. Perpertura (Duration: Year corp. will cease to exist or "perpetual")
6. (Date first transacted business in Florida. (See Sections 607.1501, 607.1502, AND 817.155, F.S.)
7
13570 Wright Cir, Thmon Fl. 33626 (Current mailing address)
8. Contract for assumbly of Computer Components (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
 Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: 30HN DEMARS S
Office Address: 13576 wright ctr. TAMAN FL 33626, (Zip Code) 10. Registered agent's acceptance:
TAMPA FL 33626, (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.
(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.

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

State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INTERCONNECT CIRCUIT 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, AS OF THE SEVENTH DAY OF NOVEMBER, A.D. 1995.

96 JAN-9 AMII: 31



Edward J. Freel, Secretary of State

AUTHENTICATION:

DATE: 7703107

11-07-95

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