	16000000000000000000000000000000000000
	alification/Tax Lien Section ision of Corporations
SUBJECT:	Outsourced Automated Services and Integrated Solutions, Inc. (Name of corporation - must include suffix)
Dear Sir or	Madam:
The enclose Florida", "O foreign corj	ed "Application by Foreign Corporation for Authorization to Transact Business in Certificate of Existence", and check are submitted to register the above referenced poration to transact business in Florida.
Please retur	m all correspondence concerning this matter to the following: -05/10/9601049007 ******70.00 *****70.00
	(Name of Person)
	(Name of Person) Outsourced Automated Services and Integrated Solutions, Inc. (Firm/Company)
•	(Name of Person) Outsourced Automated Services and Integrated Solutions, Inc. (Firm/Company)
	(Name of Person) Outsourced Automated Services and Integrated Solutions, Inc.
	(Name of Person) Outsourced Automated Services and Integrated Solutions, Inc. (Firm/Company) 9300 N. W. 36th Street (Address) Miami, Florida 33178
	(Name of Person) Outsourced Automated Services and Integrated Solutions, Inc. (Firm/Company) 9300 N. W. 36th Street (Address) Miami, Florida 33178 (City/State/Zip)
Should you	(Name of Person) Outsourced Automated Services and Integrated Solutions, Inc. (Firm/Company) 9300 N. W. 36th Street (Address) Miami, Florida 33178

COURIER ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

May 10, 1996

RONALD T. BEVANS, JR. OUTSOURCED AUTOMATED SERVICES AND INTEGR 9300 NW 36TH ST. MIAMI, FL 33178

SUBJECT: OUTSOURCED AUTOMATED SERVICES AND INTEGRATED SOLUTIONS, INC. Ref. Number: W96000010078

We have received your document for OUTSOURCED AUTOMATED SERVICES AND INTEGRATED SOLUTIONS, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

You have submitted a certified copy of the corporation's articles of incorporation. What we require for our filing purposes is a certificate of existence or good standing.

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6095.

.....

Jennifer Sindt Document Examiner

Letter Number: 496A00023044

96 HAY 20 PH 4:

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

EASTERN AIR LINES INCORPORATED / MIAMI INTERNATIONAL AIRPORT / MIAMI, FLORIDA / 33140



May 17, 1996

96 HAY 20 PH 4:

5

Ms. Sandra B. Mortham Secretary of State Florida Department of State Division of Corporations P. O. Box 6327 Tallahassee, Florida 32314

> Subject: Outsourced Automated Services and Integrated Solutions, Inc. Ref. Number W96000010078

Dear Ms. Mortham:

Enclosed is the Certificate of Good Standing from the State of Delawara for subject corporation, along with a copy of your letter dated May 10, 1996.

Please let me know if anything else is required to process the corporation's registration to do business in the State of Florida.

Thank you for your attention in this matter.

Sincerely,

Ronald T. Bevans Jr Director, Legal VAffairs

Enclosures

PLICATION BY FOREIGN CORPORATION FOR AUTHOR TO TRA SACT 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:

Outsourced Automated Services and Integrated Solutions, Inc. 1. (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	3, 65-0662877		
	(State or country under the law of which it is incor	rporated) (PEI number, if applicable)		-
4.	April 26, 1996	5. Perpetual		
••	(Date of Incorporation)	(Duration: Year corp. will cease to exist "perpetual")	or	-
6.	May 8, 1996		3	DIVIS
••	(Date first transacted business in Florida. (SEE	SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)	484	SECR
7.	9300 N. W. 36th Street		-	32-
	Miami, Florida 33178	77		RY OF
	(Curren	nt mailing address)	3	1

- Any and all lawful activities in which corporation may engage. 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: (P.O. Box or Mail Drop Box NOT acceptable)

vans, Jr.	Bevans	.T.	Rona1d	Name.
vans, Jr.	Bevans	.T.	Ronald	Name

9300 N. W. 36th Street Office Address: _

Miami

33178 (Zip Code)

Florida

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.

A. DIRECTORS (Street address only- P. O . Box NOT acceptable)	
Chairman:		
		میں در
Address:		
Director:	······	`
Director: John	J. Sicilian	
	N. W. 36th Street	
B. OFFICERS (Str	, Florida 33178 eet address only- P. O. Box NOT acceptable)	95 /
B. OFFICERS (Str hief xecutive Officen:	, Florida 33178 eet address only- P. O. Box NOT acceptable) John J. Sicilian	04 NH 56
B. OFFICERS (Str hief kecutive Officen:	, Florida 33178 eet address only- P. O. Box NOT acceptable)	÷ n ŝ
B. OFFICERS (Str hief kecutive Officen: Address: President:	, Florida 33178 eet address only- P. O. Box NOT acceptable) John J. Sicilian 9300 N. W. 3oth Street Miami, Florida 33178 J. Michael Jones	PH + 15
B. OFFICERS (Str hief kecutive Officen: Address: President:	<pre>, Florida 33178 eet address only- P. O. Box NOT acceptable) John J. Sicilian 9300 N. W. 36th Street Miami, Florida 33178 J. Michael Jones 9300 N. W. 36th Street</pre>	÷ n ŝ
B. OFFICERS (Str hief kecutive Officen: Address: President:	, Florida 33178 eet address only- P. O. Box NOT acceptable) John J. Sicilian 9300 N. W. 3oth Street Miami, Florida 33178 J. Michael Jones	PH + 15
B. OFFICERS (Str hief kecutive Officen: Address: President: Address: Secretary:	<pre>, Florida 33178 eet address only- P. O. Box NOT acceptable) John J. Sicilian 9300 N. W. 36th Street Miami, Florida 33178 J. Michael Jones 9300 N. W. 36th Street Miami, Florida 33178</pre>	PH + 15
B. OFFICERS (Str hief kecutive Officen: Address: President: Address: Secretary:	<pre>, Florida 33178 eet address only- P. O. Box NOT acceptable) John J. Sicilian 9300 N. W. 36th Street Miami, Florida 33178 J. Michael Jones 9300 N. W. 36th Street Miami, Florida 33178 John J. Sicilian</pre>	PH + 15
B. OFFICERS (Str hief kecutive Officer: Address: President: Address: Secretary: Address:	<pre>, Florida 33178 eet address only- P. O. Box NOT acceptable) John J. Sicilian 9300 N. W. 36th Street Miami, Florida 33178 J. Michael Jones 9300 N. W. 36th Street Miami, Florida 33178 John J. Sicilian 9300 N. W. 36th Street</pre>	PH + 15
B. OFFICERS (Str hief kecutive Officen: Address: President: Address: Secretary:	<pre>, Florida 33178 eet address only- P. O. Box NOT acceptable) John J. Sicilian 9300 N. W. 36th Street Miami, Florida 33178 J. Michael Jones 9300 N. W. 36th Street Miami, Florida 33178 John J. Sicilian 9300 N. W. 36th Street</pre>	PH + 15

ч. . . .

٩.

n.

13.

14.

Vice Chairman, or any officer listed in number 12 of the application) (Signature Chairman,

J. Michael Jones, President

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

State of Delaware Office of the Secretary of State

PAGE

1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OUTSOURCED AUTOMATED SERVICES AND INTEGRATED SOLUTIONS, 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 FIFTEENTH DAY OF MAY, A.D. 1996.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.





Edward J. Freel, Secretary of State 7946852 AUTHENTICATION: 05-15-96

2617874 8300 960141005