TO: orations Heartland Information Services Inc. (Name of corporation - must include suffix) SUBJECT: 200001930672 -03/23/36--01048--001 -++++70.00 Dear Sir or Madam: The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida. Please return all correspondence concerning this matter to the following: Royer A. Schangs Hartland Information (Firm/Company) 3919 DAVAL Drive Jacksonu: 14 Brach, FC 32 Vo (City/State/Zip) Should you need to call someone concerning this matter, please call: Roger A. Schanus at (904) 285-2076 (Area Code & Daytime Telephone Number)

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

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:

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.	(State or country under the law of which it is incorporated) (FEI number, if applicable)
4.	(Date of Incorporation) 5. Per octual (Duration: Year corp. will cease to exist or "perpetual")
6.	(Date first transacted business in Florida. (See sections 607.1501, 607.1502, AND 81 17.83, FS.)
7.	3919 Duval Orive
	Jacksonville Beach FL 31250 PR 3 TT
	(Current mailing address)
8.	Provide Juformatian Services. (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)
	Name: Roger Schanus
	Office Address: 3919 Duval Drive
	Jackson: //e Bouch , Florida, 3250 (Zip Code)
10	(Zip Code) Registered agent's acceptance:
Ha cor reg all	tiving been named as registered agent and to accept service of process for the above stated reporation at the place designated in this application, I hereby accept the appointment as gistered agent and agree to act in this capacity. I further agree to comply with the provisions of statutes relative to the proper and complete performance of my duties, and I am familiar with daccept the obligations of my position as registered agent.
	(Registered agent's signature)
1 I	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.

Chairman:	Paul A. Jayl
	3414 Due 1 Drive
	Jackson ville Bruch, FL 31250
Vice Chairman:	
Address:	Pin Q
	76 95 A
Director:	Ruger A. Schanus En 5
	3919 Oural Drive
	Jacksonville Beach FL 32250 75 =
Director:	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Address:	>
	
B. OFFICERS	(Street address only- P. O. Box NOT acceptable)
President:	Paul A. Jax6
Address:	3919 Davil Drive
	Jacksonville Beach, FL 32250
Vice President:	Roger A. Schaus
Address:	3919 Dual Drive
	Jacksonville Beach FL 32150
Secretary: 1-cus	un Kimberly A. Nielsch
Address:	3919 David Drive
	Jackronville Beach PL 31750
Freasurer:	
Address:	
NOTE: If nece	ssary, you may attach an addendum to the application listing additional lirectors.
officers and/or o	
	e of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

state of Minnesota

SECRETARY OF STATE

96 AUG 23 PH II: 10 SECRETARY OF STATE TALLAHASSEE, FLORIDA

Certificate of Good Standing

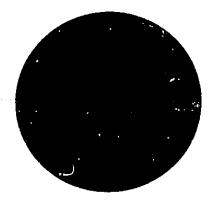
I, Joan Anderson Growe, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: Heartland Information Services, Inc.

Date Formed: 03/14/1991

Chapter Governed By: 302A

This certificate has been issued on 08/05/96.



Joan Anderson Brown Secretary of State.