

TO: Qualification/fax Lien S Division of Corporations				
SUBJECT: Aucon	a Croup Inc	sh		
(1	Nume of corporation - must in	iciude suttiv)	<u> </u>	1,954
Dear Sir or Madam:			-09/24/96 #####70.1	<u> </u>
The enclosed "Application by Fi Florida", "Certificate of Existen foreign corporation to transact b	oreign Corporation for A ce", and check are subm pusiness in Florida.	Authorization to litted to register (Transact Busine he above referer	ss in nced
Please return all correspondence	concerning this matter	to the following		s (1)
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\underline{GS}	(Name of Person)	,		J
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	(Firm/Company)			ES CONTRACTOR
520	1 Great An	nerica Pki	· #am	IVISION OF CO
	(Address)	21.02	3-20	DRPO
Sant	a Clara C	A 98.5	<u>u</u>	RPORATION OF OR
	(City/State/Zip)			3 55
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Should you need to call someon	e concerning this matter	, please call:	Carlo Control State Carlo Way Water d	
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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

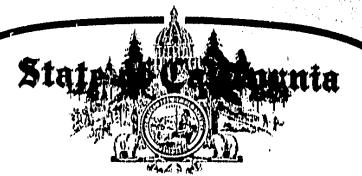
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATIONATO TO TRANSACT BUSINESS IN FLORIDA

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;

(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. Californità (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 6/4/196 (Dute of Incorporation) 5. Proctucal (Duration) Year corp. will cease to exist or "perpetual")
6. Sept 96. (Date filst transacted business in Florida, (See Sections 607, 1501, 607, 1502, AND 817, 155, F.S. C. C. Sacrato America Phys. #240
Santa Chra CA 98054 P 990
(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: ANDREW ASKINAS
Office Address: 4920 West Cypress St., Suite 100 Tampo , Florida, 33603
0. Registered agent's acceptance: (Zip Code)
daving been named as registered agent and to accept service of process for the above stated orporation at the place designated in this application, I hereby accept the appointment as egistered 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)
1. 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.

	s and addresses of officers and/or directors: (Sire acceptable)			185
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SECRETARY OF STATE

CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, BILL JONES, Secreto	ary of State of the State of Californ	nia, hereby certify:
That on the	17th day of	

AVCOM GROUP, INC.

became incorporated under the laws of the State of California by filing its Article

That no record exists in this office of a certificate of dissolution of said comoralization nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California: and

That no information is available in this office on the financial condition, business activity or practices of this corporation.



Incorporation in this office; and

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

August 9, 1996

Secretary of State