F96000000005

INC

(Name of corporation - must include suffix)

CENAXON

TO: Qualification/Tax Lien Section Division of Corporations

SUBJECT: ____

200001595792--7 -10/25/95--01037--010 *****78.75 *****78.75

IN96-22859

	V	- 1
Dear Sir or Madam:	- •	
The enclosed "Application by Foreign Corporation for Authorization to Transac Florida", "Certificate of Existence", and check are submitted to register the above foreign corporation to transact business in Florida.	t Business e referenc	in ed
Please return all correspondence concerning this matter to the following:		
William L. INGRAM		
(Name of Person)		AON 96 RECKEL
(Firm/Company) 2471 NW 63 AVENUE 2725 NW 63 AVENUE	_	18 CO AND
(Address)	_	OF STATE
SUNRISE 33313 - 2924 TAMARAC FL 33321-3768 VE	15	- Sign
(City/State/Zip)	 -	Щ
		11/16
Should you need to call someone concerning this matter, please call:	2446	1,
384 William L. Ingram at (954) 72+	3405 - 676 4	-
(Name of Person) (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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 28, 1996

WILLIAM L. INGRAM 2471 NW 63 AVENUE SUNRISE, FL 33313-2924

SUBJECT: CENAXON INC. Ref. Number: W96000022859

We have received your document for CENAXON INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

A brief description of the entity's nature of business must be included in the document.

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 note that we are returning the certified copy you submitted, as it is not the same as the certificate we require.

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) 487-6958.

Lee Rivers Document Examiner

Letter Number: 396A00049591

2471 NW 63 Avanue, Sunrise, Florida 33313-2924.

November 14, 1998

Attn.: Lee Rivers

Qualification/Tax Lien Section, Division of Corporation, Florida Department of State P.D. Box 6327, Tallahassee, Fl 32314

Dear Sir,

Re: Cenaxon Inc. - Ref. Number W96000022859

This is further to our telephone conversation on November 13, 1996 with regards to the "Application by Foreign Corporation for Authorization to Transact Business in Florida". As discussed, the Certificate of Existence attached is an official document provided by the Ministry of Consumer and Commercial Relations of the Government of Ontario, Canada. The eyelet through the pages and seel on the first page authenticate the complete document and is as provided by the above mentioned office.

Enclosed please find the completed document as per your letter of October 28 and our conversation of November 13.

Yours truly,

W^{III}. L. Ingram

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:

١.	CENAKON INC.	_
	(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.	ONTARIO CANABA 3. N/A	
	(State or country under the law of which it is incorporated) (FEI number, if applicable)	•
4.	November 21, 1994 5. Perperual (Duration: Year corp., will cease to exist or	•
	(Date of Incorporation) (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.	336 HORNER AVENUE	DIV.
	ETOBICONE TORONTO CANADA MEW 126 (Current mailing address)	FILE ECRETARY ISION OF CO
8.	SEE ADDITIONAL SHEET ATTACHED (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)	OF STATI
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	OKS
	Name: William L. Ingram	
	Office Address: 8725 NW 63 AVENUE	
	SunRise 33373-2924 Tamarae 7, Florida, 23373-2768	R.L.D
10	Registered agent's acceptance:	
reg	iving been named as registered agent and to accept service of process for the above strooration at the place designated in this application, I hereby accept the appointment street agent and agree to act in this capacity. I further agree to comply with the provision statutes relative to the proper and complete performance of my duties, and I am familiar	t as is of

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.

(Registered agent's signature)

and accept the obligations of my position as registered agent.

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12. Names	and addresses of offic acceptable)	cers and/or direct	ors: (Street address	ONLY-P.O. Box
A. DIREC	CTORS (Street addr	ess only- P. O . E	lox NOT acceptal	ble)
Chairman:	LANCE S	SEYMOUR		<u></u>
	386 HoreNE			
	ETOBICOKE			
_				
	\$735 2741 NI			
_				
_				
Director:				
_				, , , , , , , , , , , , , , , , , , ,
B. OFFIC	ERS (Street address	only- P. O. Box	NOT acceptable))
President:	<u> </u>			_
				Ţ.
Vice Presid	lent:			
				i
Secretary:				!
Treasurer:				
Address:				
_		···		
NOTE: If	necessary, you may at	tach an addendu	n to the applicatio	n list ing additional
^				
13.	. d.	Chairman or any of	ficer listed in rumber	12 of the application)

14. L. LAGRAM - VICE CHAIRMAN (Typed or printed name and capacity of person signing application)

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA - ADDITION TO FORM

8. There were no restrictions placed on the business the corporation may carry on or on powers the corporation may exercise in its home country. The primary business to be carried out in the state of Florida is software development and computer software and hardware related services.

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95 NOV 10 BAID.



Ministry of Consumer and Commercial Relations

Companios Branch 393 University Ave Suite 200 Toronto ON M5G 2M2 (410) 314-8880

Ministère de le Consommetion et du Commerce

Direction des compagnies 393 ave University Bureau 200 Terente ON M5G 2M2 (416) 314-0800



Controller of Records
COMPANIES BRANCH
MINISTRY OF CONSUMER
AND COMPERCIAL PILLATIONS
TORONTO, ONTARIO

Controlleur des Dossiers D'AECTION DES COMPAGNIES MINISTÈRE DE LA CONSONMATION ET DU COMMERCE TORONTO, ONTÁRIO

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100	ARTI	CLES OF IN	NSTITL	JTIFS					
Form 1	1. The name of the corporation	is:	Dénomi	nation socia	ole de la co	mpagnie:		١.	
Businesia Corporations	CENAXUNI	NC.		 	 - - -	╏╸ ┧╼┼╼┤		, '	
Act		_	_ _		- - -	╀╌┼╾┤╾┤	╼┼╍┼╍		
		<u>. </u>	\square	┊ ┩╌┼╸	┵┼┼	┦╼┼╾┤	┵┼╸		
Formule numěro 1				<u> </u>	<u>l.</u>				
Loi sur les 2. The address of the registered office is: Adresse du siège social:									
	336 Horner Avenue								
	(Street & Number	r or A.A. Number & o <i>de la R.R. el, s'il</i>	i if Multi-Offi s'agit d'un é	ice Building giv édifice à bures	ve Room No. iux, numéro d) (u bureau)	•		
	Etabicoke					MBW		ì	
	(Name of Municipality or Post Office) (Nom de la municipalité cu du bureau de poste)			(Postal Code) (Code postal)					
į	City of Etobicoke	***	n the	Municip	ality of Met	stropolitan Toronto			
	(Name of Municipality, Geographic Township) (Nom de la municipalité, riu canton) (County, District, Region (Comté, district, municipalité, riu canton)				egional Mun unicipalité ri	onal Municipality) icipalité régionale)			
3. Number (or minimum and maximum number) Nombre (ou nombres minimal et maximal) of directors is: A minimum of one and a maximum of five					1.				
-	4. The first director(s) is/are:	Residence eddre		(s) administ		•		•	
	First trame, initials and surname Prenom, initiales at nom de famille	municipality and Adresse persons numero de la R. code postal	: postal code nelle. ∨ com	e pris la rue et l	le numéro, le	State Yes	Canadian s or No Conadian		
	William L. Ingram 45 Galloway Road Scarborough Ontario M1E 1W6					Ye	S		
	Lance A. Seymour		orner Ave ika			Ye	5		

Limites, e'il y a lieu imposées aux activités commerciales ou aux pouvoirs de la compagnie;

NONE

6. The classes and any maximum number of shares that the corporation is authorized to issue: Categories et nombre maximal, s'il y a lleu d'actions que la compagnie est autorisée & émettre:

The Corporation is authorized to issue an unlimited number of common shares

 Rights, privileges, restrictions and conditions (if any) attaching to each class of shares and directors authority with respect to any class of shares which may be issued in series: Droits, privilèges, restrictions et conditions, s'il y la lieu, rattachés à chaque catégorie d'actions et pouvoirs des edministrateurs relatifs à chaque catégorie d'actions qui peut être émise en série:

NOT APPLICABLE

8. The issue, *.anster or ownership of shores is/is not restricted and the restrictions (if any) are as follows:

L'émission, le transfert ou la propriété d'actions est/n'est pas restreinte. Les restrictions, s'il y a tieu, sont les suivantes:

No shern of the Corporation shall be transferred without:

either the express consent of the Board of Directors evidenced by a resolution passed at a meeting of directors by the effirmative vote of not less than a majority of the directors or by instrument or instruments in writing signed by all of the directors;

or the express consent of the shareholders of the Corporation expressed by a resolution passed at a meeting of the holders of unch shares or by an instrument or instruments in writing signed by the holders of all of the shares

- 9. Other provisions, if any, are:
 - That the number of share holders of the Corporation, exclusive of persons who are in
 an employment and exclusive of persons, who, having been formerly in the
 employment of the Corporation, were, while in that employment, and have continued
 ofter the termination of that employment to be shareholders of the Corporation, is
 limited to not more than lifty, two or more persons who are the joint registered
 owners of one or more shares being counted as one shareholder.
 - 2. That any invitation to the public to subscribe for securities of the Corporation is prohibited.