To: Qualification/Tax Lien Section Division of Corporations

POINT OF SALE SOLUTIONS OF SOUTH FLORIDA INC.

	(Name of corporation - must inclu-	de suffix)
Dear Sir or Ma	adam:	
	'Application by Foreign Corporation for Authorization to Tra Existence", and check are submitted to register the above ress in Florida.	
Please return a	ll correspondence concerning this matter to the following:	
	Ross Daniels	W91-24191
	(Name of Person)	5 2 7
	"Same as Above"	
	(Firm/Company)	22
	110 Painters Mill Rd. Suite	22
	(Address)	500
	Owings Mills, Maryland 21117	
	(City/State/Zip)	
Should you nee	ed to call someone concerning this matter, please call:	4000023303841 -10/27/97-01109001 ******70.00 ******70.00
Ross Dan	iels at (410) 902-9440	SX 11/5
(Nam	e of Person) (Area Code & Daytime T	elephone Number)

COURIER ADDRESS:

SUBJECT:

Qualification/Tax Lien Section 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, 1997

ROSS DANIELS POINT OF SALE SOLUTIONS OF SOUTH FLORIDA 110 PAINTERS MILL RD., #22 OWNINGS MILLS, MD 21117

SUBJECT: POINT OF SALE SOLUTIONS OF SOUTH FLORIDA INC.

Ref. Number: W97000024457

We have received your document for POINT OF SALE SOLUTIONS OF SOUTH FLORIDA INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.)

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 (850) 487-6093.

Freta Lott Corporate Specialist Supervisor

Letter Number: 097A00052222

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIAN REGISTER A F	ICE WITH SECTION 607.1503, FLORIDA S FOREIGN CORPORATION TO TRANSACT	STATUTES, THE FO BUSINĒŠS IN THE	OLLOWING IS S STATE OF FLC	UBMITTED TO		
	f Sale Solutions Of South Fl			97 FC		
words or abbi	poration; must include the word "INCORPORA" reviations of like import in language as will clear or partnership if not so contained in the name a	rly indicate that it is a	, "CORPORATIO corporation inste	N of DV L ad of 3 R		
2. Delaware		3		- Car 122 - Si	Conc	
(State or count	try under the law of which it is incorporated)	(FI	El number, if appli	icable)		
4. July 25,		erpetual	·	T.S.		
(E	Pate of incorporation) (Durati	on: Year corp. will c	ease to exist or "p	erpetual")		
6	UPON QualificAT	Con				
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)						
7. <u>110 Pai</u>	nters Mill Rd. Suite 22	· · · · · · · · · · · · · · · · · · ·				
Owings	Mills, Maryland 21117		**	-	-	
	(Current mailing add	lress)		·	<u> </u>	
	of Electronic Equipment e(s) of corporation authorized in home state or c	ountry to be carried o	ut in state of Flori	do)	_	
	reet address of Florida registered agent:			•		
Name:	Maurice Fried	<u> </u>		• ,		
Office Address:	11202 Curry Drive	· .			- r	
	Palm Beach Gardens	, Florida, 33	418			
			code)	-		
0. Registered	agent's acceptance:					
omply with the p	ned as registered agent and to accept service of partial properties of the appointment as registered rovisions of all statutes relative to the proper and ligations of my position as registered agent. (Registered agent's significant of the properties of the proper	agent and agree to and complete performa	eat in this can a sit.	. T.C		

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.

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable) A. DIRECTORS (Street address only - P.O. Box NOT acceptable) Chairman: BARRY FRIED Address: 16 Stonegate Ct. Baltamore MD Vice Chairman: Ross Daniels Address: 8822 Howard Forest Lane Bultimou MD Director: ____ Same as Above Address: Address: _ B. OFFICERS (Street address only - P.O. Box NOT acceptable) Barry Fried President: Address: Same as above Vice President: Ross Daniels Address: same as above Secretary: ____ Address: _ NOTE: If necessary, you may attachan addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

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

Ross

State of Delaware

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "POINT OF SALE SOLUTIONS OF SOUTH FLORIDA 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 SIXTEENTH DAY OF OCTOBER, A.D. 1997.

97 NOV -4 PM 12: 20
TALLAHASSEE, 1-10RID.

Edward J. Freel, Secretary of State

AUTHENTICATION:

8706012

DATE:

10-16-97

971349892