Docume Number of 19 00006573

10				
C T Corporation Syst	:em			
Requestor's Name 660 East Jefferson S				
Address				
Tallahassee, FL 323				رستن ومسارسان وس
City State Zip	Phone		700002370 12/12/97-0	1032022
CORPORATIO	ON(S) NAME		*****70.08	*****70.00
	Symmetrix .	Inc.		
			<u> </u>	
() NonProfit	() Amendm	ent	97 DEC 12 () Merger	⊊.Jå
() Limited Liability Company () Foreign	() Dissolution	on/Withdrawal	() Mark	
() Limited Partnership () Reinstatement () Limited Liability Partner	() Annual R () Reservati		() Other () Change of R. () Fictitious I	. 🔾 A.
() Certified Copy	() Photo Co	pies	() CUS	
() Call When Ready Y-) Walk In () Mail Out	() Call if Pro () Will Wait	bblem	() After 4:30 Pick Up	
Name Availability	12/12	PLEASE	RETURN EXTRA COP	Y(S) W(,)
Document Examiner			FILE STAMPED	6 1/12
Updater			Č	אוני אוני
Verifier			()	
Acknowledgment			? PM	7,797. 1,787.4.
W.P. Verifier		.	26 12 PM 1:23	OF SMALL
CR2E031 (1-89)	• •		HS.	ማ ማ .

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.	Symmetrix, Inc.		
	(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION abbreviations of like import in language as will clearly indicate that it is a corporation instead of a or partnership if not so contained in the name at present.)		
_			
2.	Massachusetts 3. 04-284933		
	(State or country under the law of which it is incorporated) (FEI number,	if app	licable)
4.	June 25, 1985 5. Perpetual	971	DIVIS
	(Date of incorporation) (Duration: Year corp. will cease to exist or	"penp	ettal!')
6.	Upon Qualification	C 12 F	FILE WOF COM
	(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.156, F.S.))	<u> </u>	즐겁다
7.	One Cranberry Hill, Lexington, Massachusetts 02173	1:23	RATIONS
	(Current mailing address)		
	Business Reencineening systems deutopment, management con (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:	<u>nsul</u>	tins_
٠.	The title of the control of the first regions agonit		
	Name: C T Corporation System		
	Office Address: C/o C T Corporation System, 1200 South Pine		
	Plantation , Florida, 33324 (Zip Code)		
	 Registered agent acceptance: aving been named as registered agent and to accept service of process for the above stated corporate. 	ation a	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 obligation of my position as registered agent.

SALVINA ALIENIS are Aggent's signature) (Office)

SPECIAL ASSISTANT SECRETARY

(Type Name and Title of Officer)

Corporation System

(FL - 2189 - 11/16/94)

- 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:

Α.	DIRECTORS	
	Chairman:	See attached list of directors
	Vice Chair	nan: <u>see attached list of directors</u>
	Address:	
	_	
	Director: _s	ee attached list of directors
	_	
	Director:	
B.	OFFICERS	
	President:	See attached list of officers
	Address: _	<u> </u>
	_	
	Vice Presid	lent:
		· · · · · · · · · · · · · · · · · · ·
	Secretary:	

97 DEC 12 PM 1: 23

rreasurer: _	
Address:	
NOTE: If necessary, you and/or directors.	u may attach an addendum to the application listing additional officers
13. Per Kil	in, Vice Chairman, or any officer listed in number 12 of the
(Signature of Chairma application)	n, vice Chairman, or any officer listed in number 12 of the
14 PEYER KE	ie and capacity of person signing application)
(Typed or printed nam	e and capacity of person signing application)

97 DEC 12 PM 1: 23

Rider to **SYMMETRIX, INC.**

List of Officer and Directors

NAME	TITLE	ADDRESS
Dwight L. Gertz	President, Chief Executive Officer, Director	One Cranberry Hill Lexington, MA 02173
Patrick Flynn	Executive Vice President, Chief Operating Officer, Director	One Cranberry Hill Lexington, MA 02173
Ron Bohlin	Bohlin Treasurer Director	
Peter Kelman	Clerk	One Cranberry Hill Lexington, MA 02173
Gresham Brebach	Chairman of the Board of Directors	One Cranberry Hill Lexington, MA 02173





The Commonwealth of Massachusetts

Secretary of the Commonwealth

State Kouse, Boston, Massachusetts 02133

December 3, 1997

TO WHOM IT MAY CONCERN:

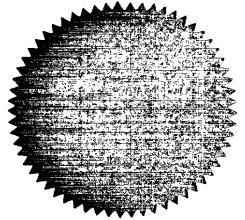
I hereby certify that according to the records of this office

Symmetrix, Inc.

is a domestic corporation organized on **June 25**, **1985**, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachuset General Laws Chapter 156B section 101 for said corporations dissolutions; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.





In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

William Travin Galicin

Secretary of the Commonwealth

DEG

* This is not a tax clearance. Certificates certifying that all taxes due and payable by the corporation have been paid or provided for are issued by the Department of Revenue.

** MGL Chapter 156B Section 83A provides that certain consolidations and mergers may be filed with the division within thirty days after the effective date of the merger or consolidation.