

WOMBLE
CARLYLE
SANDRIDGE
& RICE

A PROFESSIONAL LIMITED
LIABILITY COMPANY

3300 One First Union
301 South College Street
Charlotte, NC 28202-6025

Telephone: (704) 331-4900
Fax: (704) 331-4955

December 11, 1997

VIA FEDERAL EXPRESS

Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

400002370624--1
-12/12/97--01056--001
*****70.00 *****70.00

Re: Smoky Mountain Technologies, Inc. (the "Corporation")

Dear Sir or Madam:

Enclosed please find the following for filing with your office:

- (1) One original and one copy of the Application by Foreign Corporation for Authorization to Transact Business in Florida for the Company; and
- (2) One Certificate of Existence as issued by the North Carolina Secretary of State; and
- (3) Our firm check in the amount of \$70.00 for filing fees.

Once filed, please return the file-stamped copy of the certificate to me in the enclosed federal express envelope.

Thank you for your assistance with this matter. If you have questions or comments, please call me at (704) 331-4927.

Sincerely,

Pamela G. Speir
Pamela G. Speir
Paralegal

Enclosures

cc: Cyrus M. Johnson, Jr., Esq.

C#0182907.01

ATLANTA / CHARLOTTE / RALEIGH / RESEARCH TRIANGLE PARK / WINSTON-SALEM

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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. Smoky Mountain Technologies, 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. North Carolina

(State or country under the law of which it is incorporated)

3. 56-1845275

(FEI number, if applicable)

4. October 5, 1993

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification

(Date first transacted business in Florida (See sections 607.1501, 607.1502, and 607.1503, F.S.))

7. 112-B HIGHWAY 84 WEST, MURPHY, NORTH CAROLINA 28540

(Current mailing address)

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8. Transaction processing

(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:

Name: Steve Rowe


Office Address: 3773 NW 126th Avenue

Coral Springs, Florida, 33065

(Zip Code)

10. Registered agent acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.



(Registered agent's signature) (Officer)

Steve Rowe

(Type Name and Title of Officer)

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:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Sole Director: Stephen A. Hafer

Address: 1850 Parkway Place, Suite 925

Marietta, CA 30067

Director: _____

Address: _____

B. OFFICERS

President: B. Michael Wilson

Address: 112-B Highway 64 West

Murphy, North Carolina 28906

Vice President: _____

Address: _____

Secretary: Bill Block

Address: 112-B Highway 64 West

Murphy, North Carolina 28906

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Treasurer: Bill Block

Address: 112-B Highway 64 West

Murphy, North Carolina 28906

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.

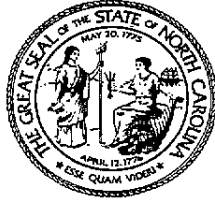

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. B. Michael Wilson, President

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

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STATE OF NORTH CAROLINA



Department of The
Secretary of State

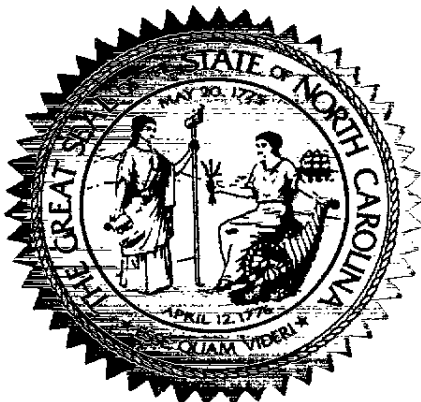
CERTIFICATE OF EXISTENCE

I, **ELAINE F. MARSHALL**, *Secretary of State of the State of North Carolina*, do hereby certify that

SMOKY MOUNTAIN TECHNOLOGIES, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 5th day of October, 1993, with its period of duration being perpetual.

I FURTHER *certify that the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.*



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 2nd day of December, 1997.

Elaine F. Marshall

Secretary of State

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