

F980000001389

Document Number Only

CF CORPORATION SYSTEM

660 EAST JEFFERSON STREET

Requestor's Name
TALLAHASSEE, FL 32301

Address

222-1092

City State Zip Phone

CORPORATION(S) NAME

TCM Services, Inc

900002453919--0
-03/11/98--01061--020
*****70.00 *****70.00

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- ☒ Profit
☐ NonProfit
☐ Limited Liability Co.
☒ Foreign
- ☐ Amendment
☐ Merger
☐ Dissolution/Withdrawal
☐ Mark
- ☐ Limited Partnership
☐ Annual Report
☐ Other
☐ Reinstatement
☐ Reservation
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☒ Pick Up
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MAR 11 1998

Thanks,
Jeff

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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACTION BUSINESS IN THE
STATE OF FLORIDA:

1. TCM Services, 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. Delaware
(State or country under the law of which it is incorporated)
3. applied for
(FEI number, if applicable)
4. 2/27/98
(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 817.155, F.S.))
7. 3724 Executive Center Drive Suite 101
Austin, TX 78731
(Current mailing address)
To conduct any lawful business, promote any lawful purpose and to engage
in any lawful act or activity permitted under the law of Florida.
8. _____
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

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9. Name and street address of Florida registered agent:

Name: C T CORPORATION SYSTEM

Office Address: c/o C T Corporation System, 1200 South Pine Island Road

Plantation, Florida, 33324
(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.

C T CORPORATION SYSTEM

Patricia A. Canario
(Registered agent's signature) (Officer)
PATRICIA A. CANARIO,
SPECIAL ASSISTANT SECRETARY

(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 (Street address only - P.O. Box NOT acceptable)

Chairman: George C. Carpenter, IV

Address: CORE, INC.
18881 Von Karman Avenue Suite 1750
Irvine, California 92612

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: William E. Nixon

Address: CORE, INC.
18881 Von Karman Avenue Suite 1750
Irvine, California 92612

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: Craig C. Horton

Address: CORE, INC.
18881 Von Karman Avenue Suite 1750
Irvine, California 92612

Vice President: William E. Nixon

Address: CORE, INC.
18881 Von Karman Avenue Suite 1750
Irvine, California 92612

Secretary: William E. Nixon

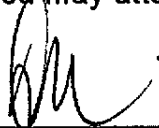
Address: CORE, INC.
18881 Von Karman Avenue Suite 1750
Irvine, California 92612

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Treasurer: William E. Nixon

Address: CORE, INC.
18881 Von Karman Avenue Suite 1750
Irvine, California 92612

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)

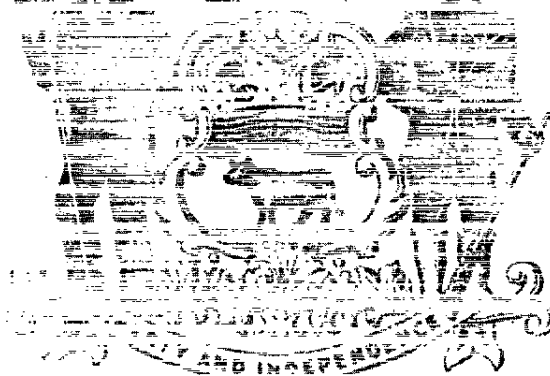
14. William E. Nixon, Vice President, Treasurer, and Secretary
(Typed or printed name and capacity of person signing application)

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Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TCM SERVICES, 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 NINTH DAY OF MARCH, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.



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Edward J. Freel

Edward J. Freel, Secretary of State

AUTHENTICATION:

2865074 8300

DATE:

8959376

981088636

03-09-98