

F 980000001426

Foley + Lardner

Requestor's Name
Address
222-6100
City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Execom (us) Inc.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
198 MAR 12 PM 2:22

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

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NEW FILINGS	
	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of R.A., Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

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OTHER FILINGS	
	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/ QUALIFICATION	
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

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**APPLICATION BY FOREIGN CORPORATION
FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

EXECOM (US) INC.

The undersigned, desiring to register as a foreign corporation pursuant to Section 607.1503 of Florida Statutes, hereby certify and declare as follows:

- (1) The name of the corporation is "EXECOM (US) INC.", a Delaware corporation (the "Company").
- (2) The Company was organized in New Castle County, Wilmington, Delaware.
- (3) The Company's Employer Identification Number is 59-3495522.
- (4) The Company was incorporated on July 2, 1997.
- (5) The duration of the Company is perpetual.
- (6) The Company has not transacted business in the State of Florida until the filing of this application for authorization to transact business in Florida.
- (7) The principal office and mailing address of the Company is 104 Riverbend Boulevard, Longwood, Florida 32779.
- (8) The Company's principal activity is the sales of computer software.
- (9) The name and street address of the agent for service of process is David J. Packwood, Execom (US) Inc., 104 Riverbend Boulevard, Longwood, FL 32779.
- (10) *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 obligations of my position as registered agent.*


David J. Packwood, As Agent

- (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.

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(12) The names and addresses of the officers and directors are as follows:

A. Directors

Bill Cox
640 Murray Street
West Perth, WA 6005
AUSTRALIA

David Packwood
104 Riverbend Boulevard
Longwood, FL 32779
USA

John Frame
640 Murray Street
West Perth, WA 6005
AUSTRALIA

Pat Colquhoun
640 Murray Street
West Perth, WA 6005
AUSTRALIA

Ian Murchison
640 Murray Street
West Perth, WA 6005
AUSTRALIA

Joseph Skrzynski
640 Murray Street
West Perth, WA 6005
AUSTRALIA

B. Officers

Bill Cox
640 Murray Street
West Perth, WA 6005
AUSTRALIA

President

John Frame
640 Murray Street
West Perth, WA 6005
AUSTRALIA

Chief Financial Officer

David J. Packwood
104 River Bend Boulevard
Longwood, FL 32779

Vice President

Pat Colquhoun
640 Murray Street
West Perth, WA 6005
AUSTRALIA

Secretary

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IN WITNESS WHEREOF, the undersigned has entered into, executed and made this Application By a Foreign Corporation For Authorization to Transact Business in Florida on this 9th day of March, 1998.

David J. Packwood
David J. Packwood, Vice President

STATE OF FLORIDA)
COUNTY OF ORANGE)

The foregoing instrument was acknowledged before me this 9th day of March, 1998, by David J. Packwood. Such person did not take an oath and: *(notary must check applicable box)*

- ☐ is/are personally known to me.
☒ produced a current Florida driver's license as identification.
☐ produced _____ as identification.

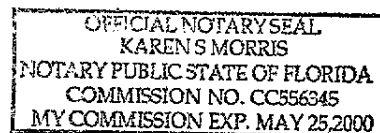
{Notary Seal must be affixed}

Karen S. Morris
Signature of Notary

Name of Notary (Typed, Printed or Stamped)

Commission Number (if not legible on seal):

My Commission Expires (if not legible on seal):



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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 "EXECOM (US) 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 TENTH DAY OF MARCH, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



Edward J. Freel

Edward J. Freel, Secretary of State

AUTHENTICATION:

DATE:

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