

To: Qualification/Tax Lien Section Division of Corporations SUBJECT: _Glyphics Communications, Inc. (Name of corporation - must include suffix) Dear Sir or Madam: The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida. Please return all correspondence concerning this matter to the following: Cheryl Hermines (Name of Person) Unisearch, Inc. (Firm/Company) 101 Capitol Way North, Suite 202 (Address) Olympia, WA 98501 (City/State/Zip) Should you need to call someone concerning this matter, please call: Cheryl Hemmings (Name of Person) (Area Code & Daytime Telephone Number)

COURIER ADDRESS:

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

FILE REQUEST

September 9, 1998



Secretary of State
Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32301

Type of Filing:

Foreign Qualification

Subject:

Glyphics Communications, Inc.

Form(s) Enclosed:

Application by Foreign Corporation for

Authorization to Transact Business in Florida

Transmittal Letter

Supporting Document(s):

Certificate of Good Standing

Check(s) Enclosed:

Check # 3257 - \$122.50.

Return Via:

Federal Express- Airbill & Envelope Enclosed

Filing Method:

ASAP

Please return to:

Cheryl Hemmings

Unisearch, Inc.

101 Capitol Way N., Suite 202

Olympia, WA 98501-1077

800-722-0708

Fax: 800-531-1717

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. Glyphics Communications, Inc. (Name of corporation: must include the word "INCORPOR abbreviations of like import in language as will clearly indice person or partnership if not so contained in the name at pre-	RATED", "COMPANY", "CORPORATION" or words cate that it is a corporation instead of a natural sent.)	or
Utah (State or country under the law of which it is incorporated)	3. 87-0538985 (FEI number, if applicable)	-
4. 4-24-95 (Date of Incorporation) 6. Upon Qualification	5. <u>Perpetual</u> (Duration: Year corp. will cease to exist or "perpetual	<u>al")</u>
(Date first transacted business in Florida. (SEE SECTION		——
7. 6975 Union Park Center, Suite 200 Midvale, UT 84047		98 SEP 110
8. Long Distance Telecommunication Serv. (Purpose(s) of corporation authorized in home state or countrible) 9. Name and street address of Florida registered	ices y to be carried out in the state of	COSPONATE COSPONATIONS
Name: NRAT Services, Inc. Office Address: 526 E. Park Avenue		
	, Florida , 32301 (Zip Code)	
Having been named as registered agent and to accept corporation at the place designated in this application registered agent and agree to act in this capacity. I all statutes relative to the proper and complete performed accept the obligations of my position as register.	on, I hereby accept the appointment as further agree to comply with the provisions o frmance of my duties, and I am familiar with	f

Tina Leland-Asst. Sec. National Registered Agents, Inc.

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.

Names and addresses of officers and/or directors: (Street address ONLY-P. O. Box NOT acceptable)
 DIRECTORS (Street address only-P. O. Box NOT acceptable)

Chairman: SEE ATTACHED ADDENIUM	
Address:	
Vice Chairman:	
Address:	
Director	 ·
Director:	-
Address:	 _
Director:	•
Address:	
:	
B. OFFICERS (Street address only- P. O. Box NOT acceptable)	98
President:	
Address:	
	_
Vice President:	1/2: 39
Address:	39
Secretary	
Secretary:	
Address:	
Treasurer:	
Address:	
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. Kody Bateman - President (Typed or printed page and conscitution	<u></u>
(Typed or printed name and capacity of person signing application)	

ADDENDUM TO CERTIFICATE OF AUTHORITY

President:

Kody Bateman 6975 Union Park Center, Ste.200, Midvale, UT 84047 529-17-7808 Residence Address: 3079 W. Red Elm Way, Riverton, UT 84065

Vice President, Secretary & Treasurer:

Gary Moulton 6975 Union Park Center, Ste.200, Midvale, UT 84047 529-39-6838 Residence Address: 14033 Deer Haven Cove, Bluffdale, UT 84065

Directors:

Kody L. Bateman 6975 Union Park Center, Ste.200, Midvale, UT 84047

Gary L. Moulton 6975 Union Park Center, Ste.200, Midvale, UT 84047

98 SEP 10 PM PS. SO

09/08/98

--- STATE OF UTAH - DEPARTMENT OF COMMERCE ----- CERTIFICATION OF GOOD STANDING ---

16:13:12

THE UTAH DIVISION OF CORPORATIONS AND COMMERCIAL CODE HEREBY CERTIFIES THAT

GLYPHICS COMMUNICATIONS, INC.

IS A UTAH CORPORATION AND IS QUALIFIED TO TRANSACT BUSINESS IN THE STATE OF UTAH. A CERTIFICATE OF INCORPORATION WAS ISSUED FROM THIS OFFICE ON 04-25-1995 AND SAID CORPORATION IS IN GOOD STANDING, AS APPEARS OF RECORD IN THE OFFICES OF THE DIVISION.

FILE # 176853 _ _

THIS CERTIFICATION IS NOT VALID UNLESS PRINTED ON PAPER DISPLAYING THE STATE SEAL IN BLUE, THE DIVISION SEAL IN GOLD, AND THE DIVISION DIRECTOR'S SIGNATURE.

DATED THIS 8TH DAY
OF SEPTEMBER, 1998

REMOTE ACCESS CERTIFICATION # 196209

98 SEP 10 PM12: 39



Korla S. Woods

Korla T. Woods Director, Division of Corporations and Commercial Code