

To: Qualification/Tax Lien Section Division of Corporations		= =			
SUBJECT: ARTS Wealth Se	ervices, Inco	rporded	•		
SUBJECT:					
Dear Sir or Madam:	500	0002780245 -02/19/9901022004			
The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to a transact business in Florida.	Authorization to Transact register the above reference	******70.00 ******70.1 Business in Florida", ed foreign corporation to	00		
Please return all correspondence concerning this matter	to the following:	_			
Thomas J. Erics	2n		·		
(Name of	Person)	-			
ARIS Corporation (Firm/Co	 				
(Firm/Co	mpany)				
270 Walker Drive (Address)		프			
(Adda	ress)				
State College P	A 16804	·	•		
State College, PA 16804 (City/State/Zip)					
			1.		
Should you need to call someone concerning this matter, please call:					
· · · · · · · · · · · · · · · · · · ·			-		
Thomas J. Ericson at (8/4) 231-3710				
(Name of Person) (Area	Code & Daytime Telephor	ne Number) 5 ATE			
		9 ² /22			
STREET ADDRESS:	MAILING ADDRESS:	900122			
Qualification/Tax Lien Section Division of Corporations	Qualification/Tax Lien Se Division of Corporations	ect <u>io</u> n			
409 E. Gaines St.	P.O. Box 6327	_ _			
Tallahassee, FL 32399	Tallahassee, FL 32314				
Enclosed is a check for the following amount:					
\$70.00 Filing Fee \$\square\$ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	J \$87.50 Filing Fee, Certificate of Status & Certified Copy			

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. (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.) (State or country under the law of which it is incorporated) transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) pose for Which the Corporation, is organized is a ment advisory services and to ex or acts concerning and and a (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) corporations may be incorporated under the PA Business Corporation 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Office Address: F

10. Registered agent's 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 obligations of my position as registered agent.

(Registered agent's signature)

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: (Street address ONLY - P.O. Box NO	OT acceptable)	
A. DIREC	TORS (Street address only - P.O. Box NOT acceptable)		
Chairman:	S. Timothy Grugeon	 	
	270 Walker Drive		-
710dfc33			
	State College, PA 16801	— ·	
Vice Chair	man:		
Address: _			
_			
Director: _	Lisa Weaver	===	
	270 Walker Drive		
	State College, PA 16801		
Disastan	Thomas T Exists	A CONTRACTOR OF THE PARTY OF TH	99 SIVIO
Director	Thomas J. Ericson	<u> </u>	
Address:	270 Walker Drive		
R OFFIC	ERS (Street address only - P.O. Box NOT acceptable)	. <u></u>	
		· • -	92
	S. Timothy Grugeon		<u> </u>
Address:	270 Walker Drive	=	₹
_	State College, PA 16801	=	
Vice Preside			
Address:			
<u> </u>			
_	TI TELEVISION	· -	
Secretary: _	Thomas J Ericson		7
Address:	270 Nalker Drive	· =	
	State College, PA 16801	-+	
Treasurer: _	Lisa Weaver	- 1	
Address:	270 Walker Drive		
7.018	State Kollege PA 16801		
NOTE: If r	necessary you may attach an addendum to the application listing additional office	_	tors.
13.	(Signature of Chairman Vice Chairman William	=	
—	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 c	or the application	on)
14 <i> }</i>	(Typed or printed name and capacity of person signing app	lication	
	The same and an including with		

COMMONWEALTH PENNSYLVANTA

DEPARTMENT 0 F

FEBRUARY 02, 1999

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT.

ARIS WEALTH SERVICES, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

ACTING Secretary of the Commonwealth

DPOS