



99000001389

ACCOUNT NO. : 072100000032

REFERENCE : 165642 4306525

AUTHORIZATION :

Patricia Kyzut

COST LIMIT : \$ 78.75

ORDER DATE : March 11, 1999

ORDER TIME : 1:16 PM

900002804609--3

ORDER NO. : 165642-010

W99-Q111

CUSTOMER NO: 4306525

CUSTOMER: Ms. Lillian Breton  
Sills Cummis Zuckerman Radin  
One Riverfront Plaza

Newark, NJ 071025400

FOREIGN FILINGS

NAME: BUSINESSEDGE SOLUTIONS INC.

QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
       PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Angie Glisar

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MAR 12 PM 2:18  
DIVISION OF CORPORATION

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003/15



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

March 12, 1999

CSC

SUBJECT: BUSINESSEdge SOLUTIONS INC.  
Ref. Number: W99000006111

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We have received your document(s) in this office, however, a copy of the document is being returned for the following:

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays  
Document Specialist

Letter Number: 199A00012014

**RESUBMIT**  
Please give original  
submission date as file date.

# 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. BusinessEdge Solutions 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. \_\_\_\_\_  
(FEI number, if applicable)
4. January 8, 1999  
(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. 399 Thornall Street  
Edison, New Jersey 08837  
(Current mailing address)
8. To engage in any lawful act or activity for which a corporation may be organized under the Florida Statutes; and more specifically, to engage in the business of providing computer software services.  
(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: (P.O. Box or Mail Drop Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida, 32301  
(Zip Code)

## 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.*

Corporation Service Company

By: Tabatha F. Fiorelli - Asst VP  
(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 **NOT** acceptable)

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

Chairman: See attached officers/directors rider

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

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

President: See attached officers/directors rider

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

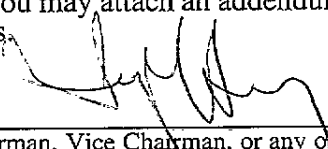
Secretary: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

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

13.  3-1-99  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Joseph Levy, Vice President, Secretary and Assistant Treasurer  
(Typed or printed name and capacity of person signing application)

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**RIDER - LIST OF OFFICERS AND DIRECTORS  
OF  
BUSINESSEdge SOLUTIONS INC.**

**I. OFFICERS:**

NAME	OFFICE	BUSINESS ADDRESS
Francis J. Casagrande	Chairman of the Board	399 Thornall Street Edison, NJ 08837
Emanuel Arturi	President and Chief Executive Officer	399 Thornall Street Edison, NJ 08837
Shailendra Jain	Vice President and Managing Director	399 Thornall Street Edison, NJ 08837
Peter Gibson	Vice President and Managing Director	399 Thornall Street Edison, NJ 08837
Thomas G. Burke	Vice President, Chief Financial Officer, Treasurer and Assistant Secretary	399 Thornall Street Edison, NJ 08837
Joseph Levy	Vice President, Secretary and Assistant Treasurer	399 Thornall Street Edison, NJ 08837

**II. DIRECTORS:**

NAME	BUSINESS ADDRESS
Emanuel Arturi	399 Thornall Street Edison, NJ 08837
Thomas G. Burke	399 Thornall Street Edison, NJ 08837
Francis J. Casagrande	399 Thornall Street Edison, NJ 08837
Peter Gibson	399 Thornall Street Edison, NJ 08837
Shailendra Jain	399 Thornall Street Edison, NJ 08837
Joseph Levy	399 Thornall Street Edison, NJ 08837

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*State of Delaware*  
*Office of the Secretary of State*

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BUSINESSEdge SOLUTIONS 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 FIRST DAY OF MARCH, A.D. 1999.

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

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DIVISION OF REGISTRATIONS  
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*Edward J. Freel*

Edward J. Freel, Secretary of State

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AUTHENTICATION: 9603753

DATE: 03-01-99