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NonRrofit   Limited Liability	Resignation of R.A. Officer/Director Change of Registered Agent	Certificate of FICTITIOUS NAME
Domestication Other	Dissolution/Withdrawal Merger	FICTITIOUS NAME SEARCH
		CORP SEARCH
Annual Report	REGISTRATION/QUALIFICATION	
Fictious Name Name Reservation	Limited Partnership Reinstatement	
	Trademark Other	

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

COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO GISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STÂTE OF FLORIDA. DHI, 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.) <u>Pennsylvania</u> State or country under the law of which it is incorporated) (FEI number, if applicable) Perpetual May 29. (Duration: Year corp. will cease to exist or "perpetual") (Date of incorporation) Date of Authorization (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 8)7.155, F.S.) Eight Neshaminy Interplex, Suite 219 PA 19053 (Current mailing address) Research and consulting (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable Name: Corporate Creations International, Inc. Fice Address: 401 Ocean Drive #312 (Door Code 125) Miami Beach . Registered agent's acceptance: aving been named as registered agent and to accept service of process for the above stated corporation at the place designated this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to mply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with ed accept the obligations of my position as registered agent. (Registered agent's signature)

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

which it is incorporated.

Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the epartment of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law

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: Asger Kei Address: Agern Alle 5, 2970 Hoersholm DENMARK Vice Chairman: Address: \_\_\_ Director: Address: Director: \_\_\_\_ Address: B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: <u>Jesper Kields</u> Address: 8 Neshaminy Interplex Suite 219 Trevose, PA 19053 Vice President: Address: Secretary: Jesper Kields Address: 8 Nehaminy Interplex, Suite 219 Trevose, PA 19053 Treasurer: Tesper Kjelds Address: 8 Neshaminy Interplax, Suite 219, Trevose, PA 19053 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) JESPER KJELDS, PRESIDEN (Typed or printed name and capacity of person signing application)

## COMMONWEALTH OF PENNSYLVANIA

## DEPARTMENT OF STATE

AUGUST 09, 1999

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT.

DHI. 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.

Secretary of the Commonwealth

DBOH