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To: Qualification/ Division of Co	Tax Lien Section			
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SUBJECT: ////	Eno Works SER	poration - must include suffix	~)	· · ·
	(Name of corp	Joradon - must include summ	.)	
Dear Sir or Madam:				
	ice", and check are submitt	on for Authorization to Trans ted to register the above refer		
Please return all corre	spondence concerning this	matter to the following:	300000300285	94
	Peter Su	ARTZ	90000300283 -10/01/990106: ******78 75 ***	3012 ***79 75
	(N:	ame of Person)	- Addition 10: 10 who	
	(Fi	SERVICE Co.	<u></u>	· • • • · • · · · · · · · · · · · · · ·
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	(C	lity/State/Zip)	<u> </u>	
	,	• •		
Should you need to ca	ll someone concerning this	matter, please call:		
Peter Si	-17	1-En 43	74 SEC 50 0	
(Name of Per	son) at (at (1-800-43 (Area Code & Daytime Telep	phone Number	-
STREET ADDRESS		MAILING ADDRE	CT 19 TARY OF ASSEE,	7
				. -
Qualification/Tax Lien Section Division of Corporations		Qualification/Tax Li Division of Corporat		
409 E. Gaines St.		P.O. Box 6327		
Tallahassee, FL 3239	9	Tallahassee, FL 323		
Enclosed is a check for	or the following amount:			
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status		\$87.50 Filing Fee, Certificate of Status Certified Copy	&
00865/00	12000e71	W09-22914	, Nhan	10-99

\$60-20-99



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

October 5, 1999

PETER SWARTZ MICROWORKS SERVICE CORP. 400 ISLAND WAY #208 CLEARWATER, FL 33767

SUBJECT: MICROWORKS SERVICE CORP.

Ref. Number: W99000022916

We have received your document for MICROWORKS SERVICE CORP. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

A photocopy of the certificate of existence is not acceptable.

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) 487-6025.

Trevor Brumbley Document Specialist

Letter Number: 099A00048203



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. MICROWORKS SERVICE CORP. (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. NEW HAMPShire
(State or country under the law of which it is incorporated)

3. 02-0484450
(FEI number, if applicable) 4. 11-3-1994 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual") 6. //- /- 9 9
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 7. 7 HARdy Rd. Londonderry NH 03053 (Current mailing address) 8. Computer SAles & Service
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: PETER SWAR. 2

Office Address: 2655 EAST BAY 47

(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.

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.

(Registered agent's signature)

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

A: DIRECTORS (Street addre	ess only - P.O. Box NOT acceptable)		, , ,
Chairman: PETER.	SWARTZ		
Address: 7 Handy	Rel		
	iy NH 03053		
Vice Chairman: PCTER	•	: 	
Address: 7 Hanu			
Condund	erry NH 03053		• • • • • • • • • • • • • • • • • • •
Director: PETER S	wartz		
Address: 7 HARLy	nd		·
Landender	MH 03053		
Director:			-
Address:			
B. OFFICERS (Street addr	ress only - P.O. Box NOT acceptable)		······································
President: PETen	SWARTZ		- 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7
Address: 7 Handy	al		
Condondece	7 NH 03053		
Vice President: SAME wo	above		
Address:			
**************************************		TALES	- 99
Secretary: Sanc As	above	AHAS	<u> </u>
Address:		SEF.	<u> </u>
**************************************		F.9.	₹ <u> </u>
Treasurer: SAME KA CA	Pove	Q H	6.
Address:			
	This is a second of the second		
NOTE: If necessary, you may a	attach an addendum to the application listing addi	itional officers and/or directors.	
13. (Signature of C	hairman, Vice Chairman, or any officer listed in	number 12 of the application)	
14	2 SWARTZ-ROUGH		
	(Typed or printed name and capacity of person	n signing application)	

State of New Hampshire Department of State

CERTIFICATE OF EXISTENCE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify MICROWORKS SERVICE CORP. is a New Hampshire corporation duly incorporated under the laws of the State of New Hampshire on NOVEMBER 3, 1994. I further certify that all fees and annual reports required by the Secretary of State's office have been received and that articles of dissolution have not been filed.

IN TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 27th day of September, A.D. 1999

William M. Gardner Secretary of State 99 OCT 19 AM 8:57
SECRETARY OF STATE
TALLAHASSEE ESTATE