# T9900000505450

To: Qualification/Tax Lien Section Division of Corporations				
SUBJECT: PERLE SYSTEMS, INC.  (Name of corporation - must include suffix)				
(Name of corpora		29803355		
Dear Sir or Madam:	-09/2	99/9901074001 1150.00 ***1150.00		
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:			
	يايدادات	)29803355 /08/9301024013		
DONNA CARONE		***70.00 *****70.00		
Name of P	erson)	20 0 001		
PERIE SYSTEMS, I		w99-20821		
(Firm/Com	pany)	en e		
630 DAKMONT'L	HUS			
(Addres	ss)			
WESTMONT IT 60859				
(City/State	/Zip)	MANUFACTURE CONTRACTOR		
(		S To		
		30 ES		
Should you need to call someone concerning this matter, please call:				
•	·	O1 := 13		
	850-2936	Der) = 1		
(Name of Person) (Area C	code & Daytime Telephone Numb	per)		
		00		
COURIER ADDRESS:	MAILING ADDRESS:	inch		
Qualification/Tax Lien Section	Qualification/Tax Lien Section	10/25		
· · · · · · · · · · · · · · · · · · ·	Division of Corporations	10/20		
	P.O. Box 6327			
Tallahassee, FL 32399	Tallahassee, FL 32314			



### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 9, 1999

DONNA CARONE PERLE SYSTEMS, INC. 630 OAKMONT LANE WESTMONT, IL 60559

SUBJECT: PERLE SYSTEMS, INC. Ref. Number: W99000020821

We have received your document for PERLE SYSTEMS, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report and penalty fees is \$1150.00.

Enclosed please find a copy of section 607.1501 or 617.1501, Florida Statutes, which lists those activities that do not constitute transacting business in this state. If after reviewing this section you determine erroneous information was inserted on the application, a notarized affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business in Florida prior to the year the application was submitted did not constitute transacting business pursuant to section 607.1501 or 617.1501, Florida Statutes.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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

Michael Mays Document Specialist

Letter Number: 599A00044646



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 29, 1999

DONNA CARONE PERLE SYSTEMS, INC. 630 OAKMONT LANE WESTMONT, IL 60559

SUBJECT: PERLE SYSTEMS, INC.

Ref. Number: W99000020821

We have received your document for PERLE SYSTEMS, INC. and your check(s) totaling \$1150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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: 699A00047581

### 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	Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or
1.	(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.	State or country under the law of which it is incorporated)  3. 52-/350539  (FEI number, if applicable)
	(Date of Incorporation)  5. PEFETUAL  (Duration: Year corp. will cease to exist or "perpetual")
6.	2/2/98
7.	(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)  LORPORATE SERVICE (D. 120)  1201 HAYS 57.  THUAHASSEE, 74.32301  (Current mailing address)
	1761 HASSEE, 7L 32301
	(Current mailing address)
	SALES - LEMOTE LOCATION  (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
	Name: CORPORATE SERVICE Co.
	Office Address: 1301 HAVS STREET
	TALLAHASSEE, , Florida, 3230/ (Zip Code)
10	Registered agent's acceptance:
co rez all	aving been named as registered agent and to accept service of process for the above stated reporation at the place designated in this application, I hereby accept the appointment as gistered agent and agree to act in this capacity. I further agree to comply with the provisions of statutes relative to the proper and complete performance of my duties, and I am familiar with d 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. Nam <b>NO</b>	es and addresses of officers and/or directors: (Street address ONLY-P. O. Box r acceptable)	
A. DIR	ECTORS (Street address only- P. O . Box NOT acceptable)	
Chairmar	n:	
Address:		,
Vice Cha	irman:	
Address:		
Director:	DANIEL S. FRAGEN-PERLE SYSTEMS INC.	:
Address:	630 DAKMONT LN.	
	WESTMONT, IL 60559	- -
Director:		
Address:	9	60
		1
B. OFFI	CERS (Street address only- P. O. Box NOT acceptable)	ि <b>म</b> 
President	JOSEPH PERLE -PERLE SYSTEMS LAB	
Address:	60 RENFREW DRIVE	- 177 - 178
	MARKHAM, ONTARIO LIR DEI	4)
	ident:	
Secretary	MICHAEL D'AMICO-PERLE SYSTEMS LTD.	•
	La Presta Aques	
riddioss.	Marketon A 120 fre	
Treasurer	MARKHAM, UNTARIO LIR DE!	
Addiess.		
		•
NOTE: 1 officers as	f necessary, you may attach an addendum to the application listing additional addor directors.	
(12)	DOSE	r ez er. z:
(13.) (5	Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
14. <u> </u>	ANIET S. FRAGEN, AICTOR (Typed or printed name and capacity of person signing application)	
<del></del>	(Typed or printed name and capacity of person signing application)	

# 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 "PERLE SYSTEMS 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 SIXTH DAY OF AUGUST, A.D. 1999.

eta fino

Edward J. Freel, Secretary of State

**AUTHENTICATION:** 

2036397 8300

991223498

DATE: 9907426

08-06-99