T99000005943

To: Qualification/Tax Lien Section Division of Corporations	
SUBJECT: BISYS Support (Name of o	orporation - must include suffix)
Dear Sir or Madam:	
	ation for Authorization to Transact Business in Florida", nitted to register the above referenced foreign corporation
Please return all correspondence concerning the Hyndall 3	- 11111112244
BIS95, In	C
3435 Stelze	(Address)
Columbus	Ohio 43219-802(ess 5) (City/State/Zip)
Should you need to call someone concerning to the state of Person at (Name of Person)	EE, FI
STREET ADDRESS:	MAILING ADDRESS:
Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	Qualification/Tax Lien Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
\$\fomale \\$70.00 \text{ Filing Fee} \square \\$78.75 \text{ Filing Fee} \text{Certificate of States}	

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. BISYS Support Services 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. State or country under the law of which it is incorporated) 3. 58-237558 (FEI number, if applicable)
4. 12/08/97 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")
6. Uene qualification (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.
7. 3435 Stelzer P.L., Suite 1000 = 景 0 1
Columbus, Ohio, 43219-8026 ME 5 MI
8. Prover Deuler Support Services (Purpose(s) of corporation authorized in homestate 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: Corporation Service Congan
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. (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.

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)
Chairman: Lynn J. Mangun
Address: 150 Clove Rd
Little Fulls, NJ 07424
Vice Chairman:
Address:
Director: Lynn J. Mangun
Address: See about
Director: Denis Sheehan
Address: 150 Clove Rd
Little Falls, NJ 07424
B. OFFICERS (Street address only - P.O. Box NOT acceptable)
President: RONALD LANKFORD
Address: 3569 Habersham at Northlake
Tucker, GA 30084
Vice President: John Czillian
Address: 3435 Stelzer Rd., Smite 1000
Columbus, Ohio 43219-8026
Secretary: Keyl Dell
Address: 150 (Lave Rd.
Little Falls, NJ 07424
Treasurer: Dennis Sheehan
Address: Sel about
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. John Chillian. Vice President
(Typed or printed name and capacity of person signing application)

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 DOCKET NUMBER : K92850765

CONTROL NUMBER : K743275

DATE INC/AUTH/FILED: 12/08/1997

JURISDICTION : GEORGIA

JURISDICTION : GEORGIA
PRINT DATE : 10/12/1999

FORM NUMBER : 211

DAVID HOLCOMB
CSC NETWORKS, INC.
1013 CENTRE ROAD
WILMINGTON, DE 19805

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of the

BISYS SUPPORT SERVICES, INC. A DOMESTIC PROFIT CORPORATION 99 NOY 16 PM 9: 16
SECRETARY OF STATE
TALLAH SSEE, FLORIDA

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the abovenamed entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Cathy Cox Secretary of State