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CORPORATION(S) NAME

		Market	
National Account Service Co	mpany LLC		
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() Call When Ready	() Call If Problem	() After 4:30	
(x) Walk In	() Will Wait	(x) Pick Up	
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Name	3/25/02	Order#: 5202829	
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Examiner		Ref#:	
Updater			
Verifier		4000051545642 -03/25/0201053008	
W.P. Verifier		Amount: \$ ****125.00 ****125.00	

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615



#### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1 National Account Service Company LLC			
(Name of foreign limited liability company)			
2. Delaware 3. 58-1767730			
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)			
4. 07/07/1986 5. Perpetual			
(Date of Organization) (Duration: Year limited liability company will exist or "perpetual")	cease to		
A (20. (3	RES		
6. (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)	2 M SSS		
	SON FILE		
7. 1200 Abernathy Road, Suite 1000, Atlanta, GA 30328			
	3990		
(Street address of principal office)	** 8: 1		
8. If limited liability company is a manager-managed company, check here			
9. The usual business addresses of the managing members or managers are as follows:			
SEE ATTACHMENT			
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having cus the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign lang translation of the certificate under oath of the translator must be submitted.)			
11. Nature of business or purposes to be conducted or promoted in Florida:			
Contractor for data processing services			
Lauret Howard			
Signature of a member or an authorized representative of a member.			
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)			
Lauret Howard			
Typed or printed name of signee			

### MANAGING MEMBERS OF NATIONAL ACCOUNT SERVICE COMPANY LLC

Mr. John E. Dye Chief Executive Officer NASCO 1200 Abernathy Road Suite 1000 Atlanta, GA 30328

Mr. Charles E. Blount Vice President of Operations NASCO 1200 Abernathy Road Suite 1000 Atlanta, GA 30328

Mr. William P. Rasmussen Vice President, Customer Relations NASCO 1200 Abernathy Road Suite 1000 Atlanta, GA 30328

Mr. Mark L. Barnard V.P. & Chief Software Development Executive NASCO 1200 Abernathy Road Suite 1000 Atlanta, GA 30328

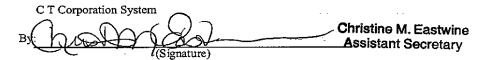
Ms. Lauret Howard V.P. & Chief Financial Officer NASCO 1200 Abernathy Road Suite 1000 Atlanta, GA 30328

#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability	y Company is:	
National Account Service Company LLC		
2. The name and the Florida street a	ddress of the registered agent and offi	ice are:
C T Corporation System		
(Name)		VISION VISION
		D2 MAR 25
c/o C T Corporation System, 1200 South Pine Island Road		
Florida st	reet address (P.O. Box NOT ACCEPTABLE)	2, <u>6</u> 2,
	,	₹ <sup>2</sup> 270
		9. RA
Plantation	<b>FL</b> 33324	? ==
	City/State/Zip	RATIONS 8: 21

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..



\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

PAGE 1

## Delaware

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NATIONAL ACCOUNT SERVICE COMPANY LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF MARCH, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

DIVISION OF CORPORATIONS



Darriet Smith Windson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1681728

\_DATE: 03-21-02

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