	ACCOUNT NO. :	0721000000	32	
	REFERENCE : AUTHORIZATION :	Patricia	7323395 2 Piguto	
	COST LIMIT :	\$ 125.00		
ORDER DATE :	July 31, 2002			
ORDER TIME :	10:49 AM			
ORDER NO. :	686121-005			
CUSTOMER NO:	7323395		600006	852836
	r. Ibrahim I. Haba 501 Canterbury Cir			
Ro	ockledge, FL 32955		يه مي	
NAME:	FOREIGN FIL	<u>INGS</u>	ASON OF CORPORATIONS TALLAHASSEE, PLORIDA	RECEIVED O2 AUG -I -MI II: "LI
XXXX QUALIF	CATION (TYPE: <u>LL</u>)			
ilityPLEASE RETUR	N THE FOLLOWING AS PR	ROOF OF FILIN	NG:	

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Angie Glisar -- EXT# 1124

EXAMINER:

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CONTACT PERSON:

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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: (Name of foreign limited liability company) DELAWARE (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 4 FEBRUARY 26TH, 2002 (Duration: Year limited liability company will cease to exist or "perpetual") (Date of Organization) UPON QUALIFICATION (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.) 2501 CANTERBURY CIRCLE 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: CANTERBURY CIRCLE ROCKLEDGE, FL 32955

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a 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:

TELE COMMUNICATIONS

Ilerahim Halia

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.)

IBRAHIM HABA

Typed or printed name of signee

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 Com	pany is:			
UIS, LLC				
2. The name and the Florida street address	s of the registere	ed agent and office are:		
Corpor	Corporation Service Company (Name)			
	1201 Hays Street Florida street address (P.O. Box NOT ACCEPTABLE)		RY OF SEE, FI	
Tallahassee	FL (City/State/Zip)	32301	2: 24 STATE LORIDA	

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.

(Signature)

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

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "UIS, 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 THIRTY-FIRST DAY OF JULY, A.D. 2002.

02 AUG -1 PM 2: 24
SECRETARY OF STATE
WILL AHASSEE FLOODING



Harriet Smith Windson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1912514

DATE: 07-31-02

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