



FO 1000004949

FILED  
01 SEP 20 PM 2:43  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

ACCOUNT NO. : 072100000032

REFERENCE : 453343 4350549

AUTHORIZATION :

COST LIMIT : \$ ~~500~~ PPD

ORDER DATE : August 30, 2001

ORDER TIME : 10:06 AM

ORDER NO. : 453343-005

700004602687--1  
-09/20/01--01053--003  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

CUSTOMER NO: 4350549

CUSTOMER: Mr. Robert .levine  
Advanced Delivery Systems,  
1071 Post Road East/suite 3  
Westport, CT 06880

FOREIGN FILINGS

NAME: ADVANCED DELIVERY SYSTEMS, INC

RECEIVED  
01 SEP 20 AM 11:36  
DIVISION OF CORPORATION

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds -- EXT# 1133

EXAMINER: \_\_\_\_\_

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. Advanced Delivery Systems, Inc.  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" 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. DE 3. 06-1037096  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. March, 2, 1981 5. "perpetual"  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. "upon qualification"  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 1071 Post Road East Suite 3 Westport, CT 06880  
(Principal office address)

Same  
(Current mailing address)

8. All business purposes allowed by law.  
(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: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301  
(City) (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.*

Corporation Service Company  
  
(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.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: See attached officers/directors rider Stuart M. Levine

Address: 1071 Post Road East Suite 3 Westport, CT 06880

Vice Chairman: David E. Montgomery

Address: " " " " " "

Director: Harry P. Sacks

Address: " " " " " "

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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B. OFFICERS

President: See attached officers/directors rider Stuart M. Levine

Address: 1071 Post Road East Suite 3 Westport, CT 06880

Vice President: Wayne Fowler

Address: " " " " " "

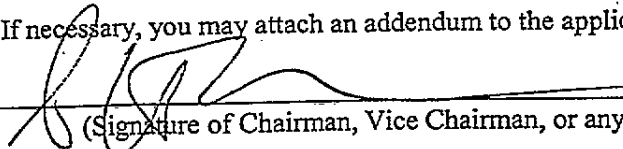
Secretary: Mary Anne Mercadante

Address: " " " " " "

Treasurer: Stuart M. Levine

Address: " " " " " "

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. Stuart M. Levine  
(Typed or printed name and capacity of person signing application)

State of Delaware  
Office of the Secretary of State

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ADVANCED DELIVERY SYSTEMS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE AS FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF SEPTEMBER, A.D. 2001.

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SECRETARY OF STATE  
WILMINGHAM, FLORIDA



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

0909174 8300

AUTHENTICATION: 1349332

010464469

DATE: 09-19-01