

FO2000001142

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Infra-red Analyzers, Inc.
(Name of corporation - must include suffix)

Dear Sir or Madam:

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:

600005040026-0
-03/04/02--01038--010
*****70.00 *****70.00

Amanda Butler
(Name of Person)

Infra-red Analyzers, Inc.
(Firm/Company)

237 Commerce St., Suite 260
(Address)

Williston, Vermont 05495
(City/State and Zip code)

For further information concerning this matter, please call:

Amanda Butler at (802) 860-1977
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

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. Infra-red Analyzers, 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. Vermont 3. 03-0328487
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. Feb. 4, 1991 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. 237 Commerce St, Suite 260 Williston, VT 05495
(Principal office address)
(same)
(Current mailing address)

8. Inspection and Testing Services using infra-red photography
(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: NRAI Services, Inc.
Office Address: 526 E. Park Avenue
Tallahassee, Florida 32301
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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.

NRAI Services, Inc.
By: Patrick O'Neill
(Registered agent's signature)
Patrick O'Neill Asst. Secy NRAI

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

A. DIRECTORS

n/a

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: George Peter Brooks

Address: 65 Lyman Drive
Williston, Vermont 05495

Vice President: _____

Address: _____

Secretary: Ann O. Brooks

Address: 65 Lyman Drive Williston, Vermont 05495

Treasurer: _____

Address: _____

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TALLAHASSEE FLORIDA

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. [Signature]
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. George Peter Brooks President
(Typed or printed name and capacity of person signing application)



STATE OF VERMONT
OFFICE OF SECRETARY OF STATE

Certificate of Good Standing

I, Deborah L. Markowitz, Secretary of State of the State of Vermont, do hereby certify that according to the records of this office

INFRARED ANALYZERS, INC.

*a corporation formed under the laws of the State of Vermont
was filed for record in this office on February 4, 1991.*

I further certify that the corporation has perpetual duration, that its most recent annual report is on file, and that articles of dissolution have not been filed.

February 22, 2002

*Given under my hand and the seal
of the State of Vermont, at
Montpelier, the State Capital*

Deborah L. Markowitz
Secretary of State

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02 MAR -4 AM 8:08
SECRETARY OF STATE
TALLMANSVILLE VERMONT

