

F03000002040

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK UP WAIT MAIL

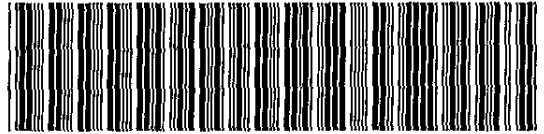
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS

03 APR 23 AM 11:14

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CT CORPORATION SYSTEM

April 23, 2003

Secretary of State, Florida
409 East Gaines Street
Tallahassee FL 32399

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03 APR 23 PM 3:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: Order #: 5832466 SO
Customer Reference 1:
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

ORS Nasco, Inc. (OK)
Qualification
Florida

ORS Nasco, Inc. (OK)
Certificate of Status/Authorization-Foreign
Florida

*I need
2 good standings
Please!
Thy.
MAN*

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

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

CT CORPORATION SYSTEM

Sincerely,

Ashley A Mitchell
Fulfillment Specialist
Ashley_Mitchell@cch-lis.com

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03 APR 23 PM 3 02
SERVICES
TALLAHASSEE, FLORIDA

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

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.

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- 1. ORS Nasco, 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. Oklahoma 3. 73-0958050
(State or country under the law of which it is incorporated) (FEI number, if applicable)
- 4. 12/19/1973 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
- 6. 2/4/03
(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. 2348 East Shawnee Bypass, Muskogee, OK 74403
(Principal office address)
- same
(Current mailing address)

8. Wholesaler of MRO, oil field, marine, industrial and construction supplies.
(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: c/o C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(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.

C T Corporation System

By: Gonnie Perry
(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.

es and business addresses of officers and/or directors:

CTORS

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 TALLAHASSEE, FLORIDA
 STATE

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

SEE ATTACHMENT

President: William K. Scheller

Address: 2348 East Shawnee Bypass

Muskogee, OK 74403

Vice President: _____

Address: _____

Secretary: Jean A. Cook

Address: 2348 East Shawnee Bypass Muskogee, OK 74403

Treasurer: _____

Address: _____

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

13. William K. Scheller
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. William K. Scheller, President
(Typed or printed name and capacity of person signing application)

Attachm

At _____ nt to Florida

Officers & Directors

1. Full Name: William K. Scheller
 Officer/Director: Officer, Director
 Officer's Title: President
 Business Address: 2348 East Shawnee Bypass
 City: Muskogee
 State: OK
 ZIP Code: 74403

2. Full Name: Jean A. Cook
 Officer/Director: Officer
 Officer's Title: Secretary
 Business Address: 2348 East Shawnee Bypass
 City: Muskogee
 State: OK
 ZIP Code: 74403

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 MUSKOGEE, FLORIDA

OFFICE OF THE SECRETARY OF STATE



CERTIFICATE OF GOOD STANDING
DOMESTIC CORPORATION

FILED
APR 23 PM 3:02
TALLAHASSEE, FLORIDA

I THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that ORS NASCO, INC., is a corporation duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of Oklahoma at the City of Oklahoma City, this 22nd day of April, 2003.



M. Susan Swartz
Secretary of State

By: *[Signature]*