

F03000002521

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

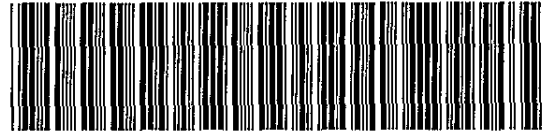
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 MAY 20 PM 1:00

FILED

DIVISION OF CORPORATION

03 MAY 20 AM 11:33

RECORDED

Handwritten initials/signature

ACCOUNT NUMBER: FCA000000005

REFERENCE: 2039685-1
(Sub Account)

DATE: 5/20

REQUESTOR NAME: Lexis Document Services

ADDRESS: _____

TELEPHONE: (____) (____ - _____) ext (____)

CONTACT NAME: _____

CORPORATION NAME: Cannon Sline Industrial, Inc.

DOCUMENT NUMBER: _____
(if applicable)

AUTHORIZATION: Cynthia J. Woodyard

87.50

- CERTIFIED COPY (1-9)
- CERTIFICATE OF STATUS (1-9)
- PLAIN STAMPED COPY

- Call When Ready
- Walk In
- Mail Out
- Call if Problem
- Will Wait
- After 4:30
- Pick Up

FILED
03 MAY 20 AM 1:00
STATE OF FLORIDA
TALLAHASSEE

RECEIVED
03 MAY 20 AM 11:33
DIVISION OF CORPORATION

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. Cannon Sline Industrial, 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. Delaware 3. 20-0006176
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 04/23/2003 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. 300 Delaware, Suite 714, Wilmington, DE 19801
(Principal office address)

(Current mailing address)

8. Provider of industrial coatings and cleaning
(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: LexisNexis Document Solutions Inc.

Office Address: 3953 W.W. Kelley Road

Tallahassee, Florida 32311
(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.

Michelle H. Kroff, Asst. Secretary

(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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MAY 20 PM 1:00
TALLHASSEE FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Mark Chuplis

Address: 300 Delaware, Suite 714, Wilmington, DE 19801

Director: John Jellinek

Address: 414 N. Orleans, Chicago, Illinois 60610

B. OFFICERS

President: Mark Chuplis

Address: 300 Delaware, Suite 714, Wilmington, DE 19801

Vice President: Steve Moore

Address: 300 Delaware, Suite 714, Wilmington, DE 19801

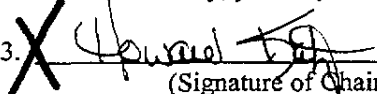
Secretary: Leeann Olson

Address: 300 Delaware, Suite 714, Wilmington, DE 19801

Treasurer: Asst. Secty. Howard Katz

Address: 414 N. Orleans, Chicago, Illinois 60610

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. Howard Katz, assistant Secretary
(Typed or printed name and capacity of person signing application)

FILED
MAY 20 PM 1:00
TALLAHASSEE, FLORIDA

Delaware

The First State

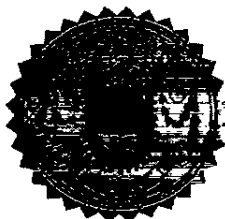
PAGE 1

FILED
MAY 20 PM 6:00
STATE
DEPARTMENT
TALLAHASSEE FLORIDA

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CANNON SLINE INDUSTRIAL, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTEENTH DAY OF MAY, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CANNON SLINE INDUSTRIAL, INC." WAS INCORPORATED ON THE TWENTY-THIRD DAY OF APRIL, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.



3650690 8300

030312078

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 2415371

DATE: 05-14-03