

F00000001149

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

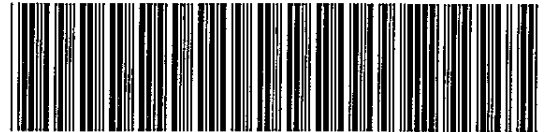
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/24/05--01008--002 **43.75

FILED
05 MAY 24 PM 1:28
RECEIVED BY THE STATE
TALLAHASSEE, FLORIDA

For
Amer

T. Smith MAY 26 2005

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DuPont Photomasks, Inc.
(Name of corporation)

DOCUMENT NUMBER: F00000001149

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Frank Coppersmith
(Name of person)

Toppan Photomasks, Inc.
(Name of firm/company)

131 Old Settlers Blvd.
(Address)

Round Rock, TX 78664
(City/state and zip code)

For further information concerning this matter, please call:

Sheila Mullen at (512) 310.6561
(Name of person) (Area code & daytime telephone number)

Enclosed is a check for the following amount:



\$35.00 Filing Fee



\$43.75 Filing Fee &
Certificate of Status



\$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)



\$52.50 Filing Fee,
Certificate of Status &
Certified Copy
(Additional copy is
enclosed)

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO
APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F00000001149

(Document number of corporation (if known))

1. DuPont Photomasks, Inc.

(Name of corporation as it appears on the records of the Department of State)

2. Delaware

(Incorporated under laws of)

3. 3/2/00

(Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? Yes. 22 Apr 05

5. Toppan Photomasks, Inc.

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

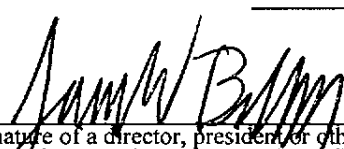
(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)


(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

James W. Boeckman

(Typed or printed name of person signing)

5/18/05

(Date)

EVP & General Counsel

(Title of person signing)

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05 MAY 24 PM 1:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Delaware

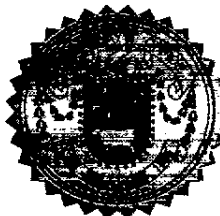
PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF MERGER, WHICH MERGES:

"TOPPAN CORPORATION", A DELAWARE CORPORATION,
WITH AND INTO "DUPONT PHOTOMASKS, INC." UNDER THE NAME OF
"TOPPAN PHOTOMASKS, INC.", A CORPORATION ORGANIZED AND EXISTING
UNDER THE LAWS OF THE STATE OF DELAWARE, AS RECEIVED AND FILED
IN THIS OFFICE THE TWENTY-SECOND DAY OF APRIL, A.D. 2005, AT 8
O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF
THE AFORESAID CERTIFICATE OF MERGER IS THE TWENTY-SECOND DAY OF
APRIL, A.D. 2005, AT 7 O'CLOCK P.M.



2572235 8100M

050402814

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3884723

DATE: 05-17-05