F0000006888

TRANSMITTAL LETTER

	cation/Tax Lien Son of Corporations	ection					
SUBJECT:	Uflex USA,	Inc.					
			corporati	on - must include si	uffix)		1 3-00
Dear Sir or Mac	dam:						
	Existence", and ch			Authorization to Tregister the above re			
Please return al	l correspondence o	oncerning th	nis matte	to the following:		/3 454611 /12/00-01091- *1150.00 ****11	
	Sally	Newton					
			(Name of	f Person)	-11)3 454611 /07/0001030	-803
	Ufle	USA, In	C.		速米	***70,00 ****	70.00
	•		(Firm/Co	ompany)		_ い - 274	30
	26 Sc	. Dawson	Street			_	
			(Add	ress)			***
	Seatt]	e, WA 9	98134				
			(City/Sta	ate/Zip)		_	
	d to call someone	concerning t				FIL. 00 DEC 13 SECRETARY TALLAHASSE	
Sally Newton	of Person)	at (206	762-1240	P-11		
(IVaine	or reison)		(Area	Code & Daytime T	i elepnone Nui	mber) STATE	
STREET ADD	RESS:			MAILING ADD	RESS:	unt	
Qualification/Ta Division of Corp 409 E. Gaines S Tallahassee, FL	porations t.	·	·	Qualification/Tax Division of Corpo P.O. Box 6327 Tallahassee, FL	orations	12/13	
Enclosed is a ch	eck for the followi	ng amount:					
気 \$70.00 Filing		5 Filing Fee ficate of Sta		\$78.75 Filing Fee Certified Copy	Cer	.50 Filing Fee, rtificate of Status & rtified Copy	



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

November 17, 2000

SALLY NEWTON UFLEX USA INC 26 SO. DAWSON STREET SEATTLE, WA 98134

SUBJECT: UFLEX USA, INC. Ref. Number: W00000027430

We have received your document for UFLEX USA, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1150.00.

Enclosed please find a copy of section 607.1501, 617.1501, or 608.502, Florida Statutes, which lists those activities that do not constitute transacting business in this state. If after reviewing this section you determine erroneous information was inserted on the application, a notarized affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business in Florida prior to the year the application was submitted did not constitute transacting business pursuant to section 607.1501, 617.1501 or 608.502, Florida Statutes.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays Document Specialist

Letter Number: 600A00059265

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. Uflex US	A, Inc.
	pration; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or
	viations of like import in language as will clearly indicate that it is a corporation instead of a or partnership if not so contained in the name at present.)
_	
	y under the law of which it is incorporated) 3. 91-1466446 (FEI number, if applicable)
(State or countr	y under the law of which it is incorporated) (FEI number, if applicable)
••	y 30, 1990 _{5.} Perpetual
(Da	te of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. August	
(Date fire	t transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. <u>26 So.</u>	Dawson Street
Seattl	e, WA 98134
	(Current mailing address)
~	re and Distribution of marine products (s) of corporation authorized in home state or country to be carried out in state of Florida; ω
(ruipose	in the second of
9. Name and str	reet address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name:	William P. Michell, II
Office Address:	1193 Tallevast Road
	Sarasota , Florida, 34243 (Zip code)
	(Zip code)
10. Registered	gent's acceptance:
in this application comply with the p	ed as registered agent and to accept service of process for the above stated corporation at the place designated, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with igations of my position as registered agent.
	Wollian &

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.

(Registered agent's signature)

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable) A. DIRECTORS (Street address only - P.O. Box NOT acceptable) Chairman: Anna Gaggero Gai Address: Via Donato Somma 78 Genova Italy 16167 Vice Chairman: Giorgio Gai Address: Via Donato Somma 78 Genova Italy 16167 Director: Address: Director: Address: B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: Anna Gaggero Gaj Address: Via Donato Somma 78 Genova, Italy 16167 Vice President: _William P. Michel, II Address: 201 Bird Key Drive Sarasota FL 34236 Secretary: Steven Brady Address: 12708 SE 223rd Drive Kent WA 98031 Treasurer: Steven Brady Address: 12708 SE 223rd Dr. Kent, WA__ 98031 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

(Typed or printed name and capacity of person signing application)

William P. Michel, II

State of Delaware

PAGE 1

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "UFLEX USA, 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 CHICE THOW, AS OF THE THIRTTETH DAY OF OCTOBER,
A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

OO DEC 13 PM II: 16
SECRETARY OF STATE

Edward J. Freel, Secretary of State

AUTHENTICATION: 0764472

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001546259

2220646

DATE: 10-30-00