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### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Saf-Gard Safety Shoe Co. Inc. (Name of corporation - must include suffix)
(Name of corporation - must include surffx)
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:
Steven m Parl
Steven m Par/  (Name of Person)  Saf-Gard Safety Shee Co. Inc. FE 37  (Firm/Company)  P. D. Box 10379  (Address)
(Address)
Greensboro, NC 27410  (City/State and Zip code)
(City/State and Zip code)
For further information concerning this matter, please call:  Steven M. Parr at (336)299-1688  (Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS:  Registration Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301  Enclosed is a check for the following amount:
\$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy

### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	E WITH SECTION 607, 1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO PREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.			
	and Safety Shoe Co. corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"			
"Inc.," "Co.," "C	Corp, " "Inc," "Co," or "Corp.")			
` .	lable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)			
2. North	Carolina 3. 58-1400677 under the law of which it is incorporated) (FEI number, if applicable)			
4	3. 12 000			
6.	e of incorporation) (Duration: Year corp. will cease to exist or "perfectual")			
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)			
7 2804	Patterson St. Greensboro, NC 27407			
.,	Patterson St. Greensboro, NC 27407 gm (Principal office address)			
P.o.B	Box 10379 Greensboro, NC 27404			
	(Current mailing address)			
. Sala	of Protective Footwear			
(Purpose(s	) of corporation authorized in home state or country to be carried out in state of Florida)			
	t address of Florida registered agent: (P.O. Box NOT acceptable)			
Name:	C T Corporation System			
Office Address:	1200 South Pine Island Road			
	Directories (			
	Plantation , Florida 33324 (City) (Zip code)			
	(=4, -0)			
10. Registered ag	ed as registered agent and to accept service of process for the phase stated corporation at the place			
uesignatea in this (	application, I hereby accept the annointment as registered agent and agree to get in this agreein. I			
juiuser agree to co	mply with the provisions of all statutes relative to the proper and complete performance of my duties, with and accept the obligations of my position as registered agent.			
CT Corporation System				
Ву	CT Corporation System  JOAN BOLDEN			

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)

ASSISTANT SECRETARY

12. Names and business addresses	of officers and/or dir	ectors:	
A. DIRECTORS			··· =
Chairman: Robert J.	Kubis		
Address: 1904 Red Fa			
Greensburo,			
Vice Chairman:			· · · · · · · · · · · · · · · · · · ·
Address:			
			•
Director: Patrick M.	Rubis		
Address: 1429 Center			
Lancaster, f			TALES OF THE
Director: Steven M. Pa	w		2 2
Address: 3702 Gramer	cy Rd		SS
Greensboro,			True IS
B. OFFICERS		,	ORATE ORATE
President: Patrick m 1	<i>Subis</i>		7
Address: 1429 Center			
Lancaster, 1		·	
Vice President: <u>Jeffrey</u> J			*
Address: 4808 Bluf	FR in Da		
	10, NC 2745	·5	
<u> </u>	4. Kubis	<u> </u>	The state of the s
		Greensboro, M	JC 27410
Ci 111		. Greensbore p	
		Conclasa	16 27410
Address: 1904 Rea	rovest Na.	Greensboro, M	00 2110
NOTE: If necessary, you may atta	ch an addendum to th	e application listing additional c	officers and/or directors.
13. Steve m Fo			
(Signature of		isted in number 12 of the application	ation)
14. Steven M. Para			
(Typed or I	printed name and capa	acity of person signing applicati	on)



## NORTH CAROLINA Department of The Secretary of State

### CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

#### SAF-GARD SAFETY SHOE CO.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 8th day of April, 1980, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 4th day of October, 2005

Secretary of State

Claire I. Marshall

Certification# 85035193-1 Reference# 7988296-cs Page; 1 of 1 Verify this certificate online at www.secretary.state.nc.us/verification