Florida Department of State

Division of Corporations Public Access System

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Date of incorporation) (Duration: Year corp. will cease to exist or "perpeture of business does not constitute a transaction per exemption noted in 607.1501(t). (Date first transacted business in Plorida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. (Principal office address) (Principal office address) (Current mailing address) 8. Sales and service of scientific and industrial instrumentation. (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 NOT acceptable)	2009
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc.," "Co." or "Corp.") (If name unavailable in Florida, cuter alternate corporate name adopted for the purpose of transacting business in Epige. (If name unavailable in Florida, cuter alternate corporate name adopted for the purpose of transacting business in Epige. (Inc.," "Co.," "Corp." "Inc.," "Co." or "Corp.") (If name unavailable in Florida, cuter alternate corporate name adopted for the purpose of transacting business in Epige. (If name unavailable in Florida, cuter alternate corporate name adopted for the purpose of transacting business in Epige. (If name unavailable in Florida, cuter alternate corporate name adopted for the purpose of transacting business in Epige. (FEI number, if applicable) (Purpose to exist or "perpeture (Duration: Year corp. will cease to exist or "perpeture (Duration: Year corp. will cease to exist or "perpeture (Duration: Year corp. will cease to exist or "perpeture (Duration: Year corp. will cease to exist or "perpeture (Duration: Year corp. will cease to exist or "perpeture (Duration: Year corp. will cease to exist or "perpeture (Duration: Year corp. will cease to exist or "perpeture (Duration: Year corp. will cease to exist or "perpeture (Duration: Year corp. will cease to exist or "perpeture (Duration: Year corp. will cease to exist or "perpeture (Duration: Year corp. will cease to exist or "perpeture" (Duration: Year corp. will cease to exist or "perpeture" (Duration: Year corp. will cease to exist or "perpeture" (Duration: Year corp. will cease to exist or "perpeture" (Duration: Year corp. will cease to exist or "perpeture" (Duration: Year corp. will cease to exist or "perpeture" (Duration: Year corp. will cease to exist or "perpeture" (Duration: Year corp. will cease to exist or "perpeture" (Duration: Year corp. will cease to exist or "perpeture" (Duration: Year corp. will cease to exist or "perpeture" (Duration: Year corp. will cease to exist or "perpeture"	
2. Delaware (State or country under the law of which it is incorporated) 4. 12/06/1962 (Date of incorporation) (Date of incorporation) (Date of incorporation) (Date first transaction per exemption noted in 607.1501(f). (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 11 Dearborn, Road, Peabody, MA 01960 (Principal office address) (Current mailing address) 8. Sales and service of scientific and industrial instrumentation. (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 NOT acceptable)	
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C.T. Compression Sucrem	
C.T. Compration System	
Name:	
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.

By: Creation System Chris McNegir

(Resistered 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.

12. Names and l	business addresses of officers and/or directors:		
A. DIRECTOR	2S	SEC	5003
Chairman: Shinic	hi Watanabe	至常	<u>ال</u>
Address: 190 Bri	dge Street, Salem, MA 01970	SSV	ı
		Œ, Ĉ	-8
Vice Chairman:		FLO3	-
		ADK 3TE	
Director: Robert	T. Santorelli		
Address: 53 You	ngs Crossing S, Ogunquit, ME 03907	· · · · · · · · · · · · · · · · · · ·	
Director: Peter A	. Genovese	<u>-</u>	
	k Road, Reading, MA 01867	·····	
B. OFFICERS		`	
President: Peter A	A. Genovese		
Address: 10 Duck	Road, Reading, MA 01867		
Vice President: H	isao Wada		
	um Way, Middleton, MA 01949		
Secretary: Masay	uki Ono		····
Address: 7 Bow S	i,Wobum, MA 01801		
Treasurer:			
Address:			
NOTE: If neces	sary, you may attach an addendum to the application listing additional officers and/or direct	ctors.	
13/Cel			
Robert T. San	(Signature of Director or Officer listed in number 12 of the application) storelli, Chief Executive Officer and Director		
14	(Typed or printed game and appealty of neuron signing application)	 	—

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "JEOL USA, INC." IS DULY INCORPORATED ONDER 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 NINTH DAY OF JUNE, A.D. 2009.

AND I DO BEREBY 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.

DATE: 06-09-09