F09000000041/

(Requestor's Name)		
(Address)		
. (Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



100147322901

06/17/09-10/1093-2082 **650.00

03/31/09--01022--024 **70.00

06/25/09--01004--001 **650.00

SECRETARY OF STATE
AHASSEE, FLORIDA

APPROVE



COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Trippe Manufacturing Compa	any
(Name of corporation	- must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Au "Certificate of Existence," and check are submitted to reg transact business in Florida.	
Please return all correspondence concerning this matter to	the following:
Charles A. Lang	
(Name of Po	erson)
Trippe Manufacturing Company	
(Firm/Comp	any)
1111 W. 35th Street	
(Addres	s)
Chicago, IL 60609	
(City/State and	l Zip code)
For further information concerning this matter, please call	:
Annette Buzinski at (773)	869-1369
	de & Daytime Telephone Number)
STREET/COURIER ADDRESS:	MAILING ADDRESS:
New Filing Section Division of Corporations	New Filing Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314
Enclosed is a check for the following amount:	
	78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 14, 2009

CHARLES A. LANG TRIPPE MANUFACTURING COMPANY 1111 W. 35TH STREET CHICAGO, IL 60609

SUBJECT: TRIPPE MANUFACTURING COMPANY

Ref. Number: W09000015319

We have received your document for TRIPPE MANUFACTURING COMPANY and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Based on the information you have provided and in accordance with s.607.1502(4), 608.502(4) or 617.1502(4), F.S., this office will reduce the civil penalty of \$1,000 per year to \$500 per year for each year this entity transacted business or conducted its affairs in Florida prior to qualification. Therefore, the total amount due to cover both annual report/uniform business report and penalty fees is \$650.00.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 109A00011043



1111 W. 35th Street • Chicago, IL 60609 Tel: 773.869.1111 • Fax: 773.869.1329 www.tripplite.com

May 5, 2009

Ms Valerie Herring Regulatory Specialist II New Filing Section - Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

RE: Letter Number 109A00011043

Dear Ms Herring:

We have received your April 1st letter advising Trippe Manufacturing Company ("TMC") that it is liable for penalty fees of \$1,150. Pursuant to Florida statutes, you are collecting a civil penalty for conducting business in Florida prior to registration with the Division of Corporations.

This letter respectively requests that the \$1,150 penalty be waived because TMC is an Illinois corporation and has complied with Florida Statutes to the best of its knowledge. TMC has customers in Florida but it receives and approves all customer orders in Illinois. TMC is registered with the Florida Department of Revenue and has complied with all related sales tax filings. TMC had not registered earlier with the Florida Department of State because it was not aware of the requirement for the level of activities it conducted in Florida, as defined by Florida Statutes Section 607.1501.

Please consider that TMC has been properly registered and compliant with the Florida Department of Revenue. Please consider that TMC had registered with the Division of Corporations once it was awarded a contract and advised of the additional registration requirement. Please consider these facts and cancel the penalty.

Thank You, Charles A. L.

Charles A. Lang

CFO





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.

Tripp Lite			_	
•	·	e adopted for the purpose of transacting business in Florida)	J	
_{2.} Illinois	3.	36-1881000		
(State or country t	inder the law of which it is incorporated)	(FEI number, if applicable)	_	
4. 02/07/30	5.	perpetual		
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	-	
6. 09/08				
	•	in Florida, if prior to registration) 502, F.S., to determine penalty liability)	_	
_{7.} 1111 W. 35	5th Street, Chicago, IL 6060			
	(Principal office add	iress)	-	
1111 W. 35	5th Street, Chicago, IL 6060	09	7	0
	(Current mailing add	dress)	CEC.	NUL 60
	ugh distributors		RETAF AHAS	SE 5
(Purpose(s)	of corporation authorized in home state or c	ountry to be carried out in state of Florida)	338 1,43	
9. Name and street	address of Florida registered agent: (P.	O. Box <u>NOT</u> acceptable)	FLORIDA	MH 4:
Name:	Corporation Service Company		PAIN AND AND AND AND AND AND AND AND AND AN	Ġ
Office Address:	1201 Hays Street		بحرثن	
	Tallahassee	, Florida		
	(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.

Jacqueline N. Casper, Assistant VP

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 business addresses of officers and/or directors:

09 JUN 16 AM 4: 15

A. DIRECTORS	SECRETARY OF STATE
Chairman:	TALLAHASSEE. FLORIDA
Address:	
/ice Chairman:	
address:	
Barre Seid	
1111 W. 35th Street	
Chicago, IL 60609	
virector:	
Address:	
B. OFFICERS Tresident: Barre Seid Address: 1111 W. 35th Street	
Chicago, IL 60609	
ice President:	
ddress:	
Barre Seid	· · · · · · · · · · · · · · · · · · ·
ddress: 1111 W. 35th Street	
easurer: Chicago, IL 60609	
ddress:	
OTE: If necessary, you may attach an addendum to the application lis	
(Signature of Director or Officer listed in number	12 of the application)
Barre Seid, President	
(Typed or printed name and capacity of person s	signing application)



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

TRIPPE MANUFACTURING COMPANY, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON FEBRUARY 07, 1930, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



Authentication #: 0907702030

Authenticate at: http://www.cyberdriveillinois.com

In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 18TH

day of

MARCH

A.D.

2009

Desse White

SECRETARY OF STATE