000003140 TRANSMITTAL LETTER

TO: QUALIFICATION/REGISTRATION SECTION DIVISION OF CORPORATIONS

400001508004 -06/08/95--01018--001 *****70.00 *****70.00

SUBJECT:	Decalift USA, Inc.	
	(Name of corporation)	
Dear Sir or Madam	:	
Florida", "Certific:	plication by Foreign Corporation for Authorization to Transact ate of Existence", and check are submitted to register the above to transact business in Florida.	
Please return all co	rrespondence concerning this matter to the following:	
	Christine Carter	
	(Name of Person)	
	Decalift USA, Inc.	
	(Finn/Company)	
	4008 Vista, Suite 100-A	
	(Address)	1700
	Pasadena, Texas 77504	
	(City, State and Zip Code)	44.
	call someone concerning this matter, please call:	
Christine C		
(Name of	Person: Area Code & DaytimeTelephone Number	

COURIER ADDRESS:

Qualification/Registration Sec. Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

MAILING ADDRESS:

长。 835 JUN 28 PH 3:56 Qualification/Registration Sec. Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Sandra B. Morthum Secretary of State

June 8, 1995

CHRISTINE CARTER DECALIFT, U.S.A., INC. 4008 VISTA, SUITE 100A PASADENA, TX 77504

SUBJECT: DECALIFT, U.S.A., INC. Ref. Number: W95000011706

We have received your document for DECALIFT, U.S.A., INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The date first transacted business in Florida within the meaning of s. 607.1501, F.S., must be set forth in section 6 of the application. If the corporation has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office is required to collect the minimum civil penalty of \$500 for each year other than the application filing year, that a foreign corporation transacts business in this state without authority along with the past annual report fees due this office.)

Please list the nine digit federal employer identification number in section 3.

Please list the street address of each officer/director. If the officer/director does not have a street address, list the mailing address and write (N/A).

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

The document must include original signatures.

Please return 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 (904) 487-6092.

Hart Collins Senior Corporate Section Administrator

Letter Number: 695A00028303

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:

			3,	1.76-0 (FEI numb	37630-7 en if applicabl	• 1	•
Name and street address: Name and street address: Name at passage at the pa							
6	May 1995						
(C	Date first transpoted busines	ss in Florida. 1500 ve	ctions 607.15	01, 607.1502	and 817.155.	F.S.)	
7. ,	4008 Vista,	Suite 100-A				ന 3	. ~
	Pasadena, T	exas 77504				۱۳۱۱ - ۱۸ د سا	40 13
•			ress)				- (1 : , } -91
я	Heavy Lift	Company					تتران المانية مانسيات
9.	Name and street ad	dress of Florida	registered	agent:		<i>မွာ</i> ဟ	STATE STATE
	Office Address:	4651 SherIda	n Street,	Suite 300)		
						33021-3449	
					, , , , , , ,	(Zip Code)	_
	ving been named as n	egistered agent a designated in ti	his applicat	ion, I here.	by accept t	he appointment	35

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 addresses of officers and/or directors:	
	DHILCTORS	
	Chairman: <u>Difna Dayiria</u>	
	Address: Via Onarato Vigliani 123	
	Torino, Italy 10127	
	Vce Chairman:	
	Address:	
	ى <u>دود مى چ</u> ەرۋا كالىكىنىشىدادات دائىرىيى ۋا رويانىدالى دائىرى دائىرى ئېرىنىدى ئىلىنى ئېدىدىنىدا ئورىزىدى	
	Dinignos Dott, Giovanni Iswero	
	Address: Via Onarato Vigliani 123	
	Torino, Italy 10127	
	Director:	
	Addresn:	
8 .	OFFICERE	
	Prosident Glunggos Dimerino	
	Address: Via Onarato Vigliani 123	
	Torino, Italy 10127	
	Vice President:	
	Address:	
	AnnistantSecremery: Dott Glovanni Povoro	
	Address: Via Onarato Vigliani 123	
	. Torino, Italy 10127	
	Treasuron	
	Address:	
	Et: If firedwarary, you may attach an addendum to the application fating additional office for directors.	ſ¥•
*1~	x Sho-bhuc Devi 200 Squaduri of Chairman, Visa Chairman, or any officer belief in Tumber 12 of the actoricateirs	



The State of Texas

SECRETARY OF STATE

IT IS HEREBY CERTIFIED, that Articles of Incorporation of

DECALIFT, U.S.A., INC. (CHARTER #1238662-00)

were filed in this office and a certificate of incorporation was issued on

JULY 24, 1992;

IT IS FURTHER CERTIFIED, that no certificate of dissolution has been issued, and that the corporation is still in existence.



IN TESTIMONY WHEREOF, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in the City of Austin, on May 9, 1995.

rost.

MAC

Antonio O. Garza, Jr. Secretary of State