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CT CORPORATION SYSTEM
Requestor's Name
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Address
Tallahassee, FL 32301 222-1092
City State Zip Phone

300002869023--5
-05/10/99-01053-011
*****70.00 *****70.00

CORPORATION(S) NAME

Fuller Company

- Profit
- NonProfit
- Limited Liability Co.
- Foreign
- Amendment
- Merger
- Dissolution/Withdrawal
- Mark
- Limited Partnership
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DIVISION OF CORPORATIONS
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6/5/99

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. Fuller Company
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
- 2. Delaware
(State or country under the law of which it is incorporated)
- 3. 23-0606560
(FEI number, if applicable)
- 4. 21 August 1928
(Date of Incorporation)
- 5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
- 6. Not applicable, upon qualification.
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
- 7. 2040 Avenue C, Bethlehem, PA 18017-2188

(Current mailing address)

8. To engage in any lawful act or activity for which corporations may be organized.
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. **Name and street address of Florida registered agent:** (P.O. Box or Mail Drop acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road
Plantation, Florida, 33324
(Zip Code)

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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.

Korri A Behler (Registered agent's signature) **KORRI A. BEHLER**
Special Assistant Secretary

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: (Street address ONLY- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: Ib Jacobsen

Address: 2040 Avenue C, Bethlehem, PA 18017-2188

Vice Chairman: Elmer D. Gates

Address: 83 South Commerce Way, Bethlehem, PA 18017

Director: Kai Lyngsie

Address: 2040 Avenue C, Bethlehem, PA 18017-2188

Director: John A. Alogna

Address: 2040 Avenue C, Bethlehem, PA 18017-2188

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: Kai Lyngsie

Address: 2040 Avenue C, Bethlehem, PA 18017-2188

Vice President: Christian Jepsen

Address: 2040 Avenue C, Bethlehem, PA 18017-2188

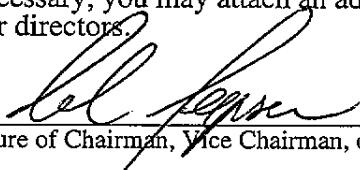
Secretary: John A. Alogna

Address: 2040 Avenue C, Bethlehem, PA 18017-2188

Treasurer: Kevin Chabin

Address: 2040 Avenue C, Bethlehem, PA 18017-2188

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Christian Jepsen, Vice President
(Typed or printed name and capacity of person signing application)

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Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FULLER COMPANY" 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 OFFICE SHOW, AS OF THE SIXTH DAY OF MAY, A.D. 1999.

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.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Edward J. Freel

Edward J. Freel, Secretary of State

0241729 8300

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AUTHENTICATION:

9727822

DATE:

05-06-99