## F006000000751

## TRANSMITTAL LETTER

To: Qualification/Tax Lien Section Division of Corporations		
SUBJECT: T+M DISTRIB (Name of corpora	UTORS IN( tion - must include suffix)	<u> </u>
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation f "Certificate of Existence", and check are submitted t to transact business in Florida.	or Authorization to Transact B o register the above referenced	usiness in Florida", I foreign corporation
Please return all correspondence concerning this mat	ter to the following:	::000031248008
THOM A (Name	S W. DALY of Person)	-02/04/0001100001 
TAM DISTRIB	WTORS, INC Company)	<del></del> .
35 IRONIA RO	DAD idress)	
FLANDERS N.	T 07836	<del></del>
	•	00 SEC
Should you need to call someone concerning this ma	tter, please call:	FI FEB AHA
LORRAINE TIERNEY at (973) (Name of Person) (Are	3 584-1468	FILED RETARY OF S AHASSE FI
(Name of Person) (Are	a cone a payame receptione	Number) FLORID
STREET ADDRESS:	MAILING ADDRESS:	)A
Qualification/Fax Lien Section Division of Corporations	Qualification/Tax Lien Se	ction unth
409 E. Gaines St. Tallahassee, FL 32399	P.O. Box 6327 Tallahassee, FL 32314	2/10
Enclosed is a check for the following amount:	à	•
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

## RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

-,	, do hereby certify
(Name)	
that this Resolution of the Board of Directors of	
T+M DISTRIBUTORS, INC. (Corporate Name)	-
(Corporate Name)	
a corporation duly organized and existing under the laws of the State of NEW	
was duly adopted on	<u> </u>
was duly adopted on	CRETT B
(Corporate Films)	SSA L F
organized and existing in the State of $NEW$ $Jersey$ , hereby a	dopts the name
organized and existing in the State of <u>NEW JERSEX</u> , hereby a  T+M DISTRIBUTORS = HURLBURT, 1	for use in Florida.
·	A 3. 1. 6.5
Dated: 1-20-00	
Signature of either Chairman, Vice Chairman of any officer	ilent
,	
THOMAS W DALY Type or print name	··
t ype or print name	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

## 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.

115000000000000000000000000000000000000	
1. T+M DISTRIBUTORS, INC.  (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.)	1.41.1
2. NEW JERSEY 3. 2286535  (FEI number, if applicable)	· , - <del>, ,</del>
4. 5-7.79 5. PERPETUAL  (Date of incorporation) 5. PERPETUAL  (Duration: Year corp. will cease to exist or "perpetual")	in the sufficiency
6. FEBRUARY 1, 2000 (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)  7. 35 IRONIA ROAD  FLANDERS NEW JERSEY 07836  (Current mailing address)	
8. AWARD OF GOVT. NONTRACT AT HURL BURT FIELD  (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 or Mail Drop Box NOT acceptable)  Name: Jhy Misieuricz	
Having been named as registered agent and to accept service of process for the above stated corporation at the place design this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to conthis application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to conthis applications of all statutes relative to the proper and complete performance of my duties, and I am familiar with and the obligations of my position as registered agent.  (Registered 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	accept
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to derivery of and appropriate the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the	

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

which it is incorporated.

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)		
Chairman:		
Address:		<del></del> - ,,
		<del></del>
Vice Chairman:		<del></del>
Address:		
Director:		
Address:		
Address:		· · · · · · · · · · · · · · · · · · ·
	·	<del></del>
Director:	F	in p. 1840
Address:	7 4	<del> </del>
B. OFFICERS (Street address only - P.O. Box NOT acceptable)		<del>- ;                                   </del>
President: THOM AS W. DALY		<u></u> :≒-
Address: 11 WiTHERSPOON LANE	SECT SALL	
BASKING RIDGE, NJ 07920		<del></del> ·
Vice President:		<del></del>
Address:	<u> </u>	
	.0R	
Secretary: THOMAS W. DALY	DA 59	<del></del>
Address II WITHER SPOON LANE		· Allera
BASKING RIDGE, NJ 07920	· " · · · · <del>•</del>	
Treasurer: THOMAS W. DALY		<del></del>
12 1. THEOSDAY I ANS	i de la companya de l	
Address: 11 WITHERS FOOT LINE		
BASKING PIOGE, NJ 07920		:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or direction listing additional officers and additional officers and/or direction listing additional officers and additional officers	ectors.	
(Signature of Chairman, Vice Chairman, or any officer listed in humber 12 of the applica	tion)	<u></u>
THE SALV - DOESTOFAT	/	
(Typed or printed name and capacity of person signing application)		To english



T & M DISTRIBUTORS, INC.

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on May 7, 1979.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Thomas W Daly =35 Ironia Road |Flanders, NJ 07836

Continued on next page . . .

SECRETARY OF STATE TALLAHASSEE, FLORIDA

