TRANSMITTAL LETTER

I MAI WILLIA	D DETTER	
To: Qualification/Tax Lien Section Division of Corporations		
SUBJECT: Timelox, Inc.		
(Name of corporation - must include suffix)		
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for A "Certificate of Existence", and check are submitted to reto transact business in Florida.		
Please return all correspondence concerning this matter	to the following:	
Mark Livingston	•	
Mark Livingston (Name of	Person)	
Timelox, Inc. 60	Assa Abloy, Inc	
(Firm/Con	pany)	
\	**************************************	
110 Sargent Drive *****70.00		
(Addre	ess)	
New Haven, CT, OG	.511	
(City/State/Zip)		
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Should you need to call someone concerning this matter, please call:		
) 499-6807	
(Name of Person) (Area C	ode & Daytime Telephone Number	
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	P 2	
STREET ADDRESS:	MAILING ADDRESS:	
Onelification/From Lion Section	Qualification/Tax Lien Section	
Qualification/Tax Lien Section Division of Corporations	Division of Corporations	
409 E. Gaines St.	Division of Corporations P.O. Box 6327	
Tallahassee, FL 32399	Tallahassee, FL 32314	
Enclosed is a check for the following amount:	mh	
\$70.00 Filing Fee \$\Bigcup \$78.75 Filing Fee & \$\Bigcup \$\text{Certificate of Status}\$	\$78.75 Filing Fee & S87.50 Filing Fee, 9/28 Certified Copy Certificate of Status & Certified Copy	

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. Timelox, 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.) (State or country under the law of which it is incorporated) (Date of incorporation) (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) Orive New Haven, CT 0651 (Current mailing address) See attached certificate of incorporation (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) CT Corporation System Name: Office Address: 1200 South Pine Island Road Plantation 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. AMY BERTELETTI SPECIAL ASSISTANT SECRETARY

(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 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.

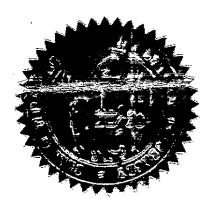
^{12.} Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)	
Chairman: Jan Wabrews	
Address: Lodjursgatan 2	
261 44 Landskrona, Sweden	
Vice Chairman: <u>V/A</u>	
Address:	
Director: Mathew Mrowczynski	
Address: 127 Route 206, Suite 16A	
Hamilton, NJ 08610	
Director: Jorgan Mansner	
Address: 107 23 Stackholm	
Sweden	
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	
President: Jan Wabrews	
Address: Ladjursquatan 2	
261 44 Landskrona, Sweden	OO SEC
Vice President: Matthew Mrowczynsk.	>≃ ∽
Address: 127 Boute 206, Suite 16A	
Hamilton, NJ 08610	三 三 三 三 三 三 三 三 三 三 三 三 三 三 三 三 三 三 三
Asst. Secretary: <u>Jeffrey Mereschuk</u>	2: 4 [ATE @RID
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New Haven CT 06511	
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F.O. Treasurer: Jorgan Mansner	
Address: 107 23 Stockholm	
Suseden	
NOTE: If necessary, you may attach an addendum to the application listing additional office	ers and/or directors.
13. Signature of Chairman, Vice Chairman, or any officer listed in number 12	of the application)
14. Jeffrey A. Mereschut Asst. See	eretary
Commend or printed name and capacity of person signing at	nnlication Y

STATE OF NEW JERSEY DEPARTMENT OF TREASURY FILING CERTIFICATION (CERTIFIED COPY)

TIMELOX, INC.

I, the Treasurer of the State of New Jersey, do hereby certify, that the above named business did file and record in this department the below listed document(s) and that the foregoing is a true copy of the Certificate Of Incorporation as the same is taken from and compared with the original(s) filed in this office on the date set forth on each instrument and now remaining on file and of record in my office.



IN TESTIMONY WHEREOF, I have

hereunto set my hand and affixed my Official Seal at Trenton, this

19th day of June, 2000

PM 2: 48

Roland M Machold Treasurer