TRANSMITTAL HETTER
To: Qualification Tax Lien Section Division of Corporations
SUBJECT: The Strong Co. Inc. (Name of corporation - must include suffix)
Dear Sir or Madam:
The enclosed "Application by Poreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Erin M Boggan Controller
The Storma Co. Inc.
(Rim)/Company) 1000034584713 -11/09/0001043007
Pb. Boy 9209 ******70.00 ******70.00
Pine Bluff AR 71611
(City/State/Zip)
Should you need to call someone concerning this matter, please call:
0: 00 0
(Name of Person) (Area Code & Daytime Telephone Number)
STREET ADDRESS: MAILING ADDRESS:
Qualification/Tax Lien Section Qualification/Tax Lien Section
Division of Corporations Division of Corporations P.O. Box 6327
Tallahassee, FL 32399 Tallahassee, FL 32314
Enclosed is a check for the following amount:
\$70.00 Filing Fee S78.75 Filing Fee & S78.75 Filing Fee & Certificate of Status Certificate of Status Certificate of Status Certificate S78.75 Filing Fee & Ce

STF F132376F.2



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

November 17, 2000

ERIN M. BOGGAN, CONTROLLER THE STRONG COMPANY, INC. PO BOX 9209 PINE BLUFF, AR 71611

SUBJECT: THE STRONG COMPANY, INC.

Ref. Number: W00000027482

We have received your document for THE STRONG COMPANY, 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 name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of DOCUMENT SPECIALIST indicated.

The registered agent must sign accepting the designation.

Your form says "see attached," but there was no signature page attached.

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 (850) 487-6958.

Lee Rivers Document Specialist

Letter Number: 700A00059341

RESOLUTION OF BOARD OF DIRECTORS (Please print or type)

I, the undersigned Larry Porter, do hereby certify
that this Resolution of the Board of Directors of The Strong Co. Inc.
(Corporate Name) a corporation duly organized and existing under the laws of the State of Arkansas,
was duly adopted on
Be it resolved, that The Strong (Corporate Name)
The Strong-Seal Co. for use in Florida.
Dated: Join 9 2000 Signature of either Chairman, Vice Chairman or any officer Signature of either President Type or print Name

INHS19(1/00)

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.

ORBIGIN CONFORMION TO HOMOSOF BOOMISSON THE STATE OF THE
1. The Streng Co. Linc. (Name of corporation; must include the world "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. (State or country under the law of which it is incorporated) 3. 71-08141639 (FEI number, if applicable)
4. Sept 14 1998 (Date of incorporation) 5. Percetua (Duration: Year corp. will cease to exist or "perpetual")
6
7. P.D. Bay 9209
Pine Bluff, AR 711011 (Current mailing address)
8. MANUFACTURE LIGHT COMENT PRODUCTS Solven (Purpose(s) of corporation authorized in home state or country to be carried out in state of blorida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Office Address: 1200 S. Pine Island Rd.
Plantotion, Fil Florida, 33384 (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.
See attached (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)

. *	
, DIRECTORS (Street address only - P.O. Box NOT acceptable)	
hairman: William A. Strong, Sr.	
ddress: 4505 Emmett Sanders Rd.	
Pine Bluff, AR 71601	
•	
fice Chairman:	
address:	
Director:	
Address:	
Director:	
Address:	
Address: 4505 Emmett Sanders Ro) Pine Bluff, MR. 71601 Vice President: Address: Secretary:	THE TOWN OF THE PLOND OF THE PL
Address:	
Treasurer: Murray Claycomb	
Address: 114 N. Myrtle	
Warren, At 71671	
NOTE: If necessary, you may attach an addendum to the application listing additional office	rs and/or directors.
	-
(Signature of Chairman, Vice Chairman, or any officer listed in number	12 of the application)
14. President (Typed or printed name and capacity of person signing appl	ication)
(ryped or bining using and capacity or because righting abb-	·

P. 05

SEP-21-00 THU 12:10 PM SPANN & ASSOCIATES, LTD FAX NO. 8705354401

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415 or 608.507, Florida Statutes, the undersigned corporation authorized under the laws of the state of Florida, submits the following statement in designating the registered agent/registered office, in the state of Florida.

- 1. The name of the corporation is: THE STRONG CO.
- 2. The name and address of the registered agent and office is C T Corporation System, 1200 South Pine Island Road, Plantation, Florida 33324

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

M S Green Assistant Secretary





State of Arkansas SECRETARY OF STATE



CERTIFICATE OF GOOD STANDING OF A DOMESTIC CORPORATION

I, Sharon Priest, Socretary of State of Arkansas, and as such, keeper of the records of domestic and foreign dorporations, do hereby certify that the records of this office show:

THE STRONG COMPANY, INC.

a corporation chartered under the laws of the State of Arkansas, filed Articles of Incorporation, September 14, 1998.

I further certify that as far as the records show, this corporation is at this time chartered and in good standing, having met all the requirements governing a domestic corporation in this State.

In Testimony Whereof, I have hereunto set my hand and affixed my Official Seal. Done at my office in the City of Little Rock, Arkansas this 16th day of October 2000.

Sharon Priest, Secretary of State

D E Morrow

C-2/Rev 10-1-88