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GOLDBERG & SIMPSON, PSC

July 18, 2001

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†ALSO ADMITTED MARYLAND
AND DISTRICT OF COLUMBIA
*ALSO ADMITTED ALABAMA
**ALSO ADMITTED DISTRICT
OF COLUMBIA
‡PROFESSIONAL SERVICE
CORPORATION

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: **Electromechanical Research Laboratories, Inc.**
Application by Foreign Corporation

Dear Sir or Madam:

Enclosed please find one original and one copy of an Application by Foreign Corporation for Authorization to Transact Business in Florida, along with an original Certificate of Existence, in connection with the above referenced entity. Also, enclosed is a check in the amount of \$70.00 representing your filing fee.

Please return file-stamped copy and letter of acknowledgment to the undersigned. Thank you.

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*****70.00 *****70.00

Sincerely,



Lora D. Ogden, Paralegal

Enclosures

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**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. Electromechanical Research Laboratories, 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.)
2. Indiana 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. June 26, 1970 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. P.O. Box 1026, 2560 Charlestown Road
New Albany, Indiana 47150
(Current mailing address)
8. To transact any lawful business for which corporations may be organized.
(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: Dr. Larry C. Wilkins
Office Address: 124 Isle of Venice, Apt. 2
Ft. Lauderdale, Florida, 33301
(Zip code)

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TALLAHASSEE, FLORIDA

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.

Dr. Larry C. Wilkins

(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: Dr. Larry C. Wilkins

Address: 124 Isle of Venice, Apt. 2

Ft. Lauderdale, FL 33301

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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

President: Dr. Larry C. Wilkins

Address: 124 Isle of Venice, Apt. 2

Ft. Lauderdale, FL 33301

Vice President: Susan Rae Wilkins

Address: 124 Isle of Venice, Apt. 2

Ft. Lauderdale, FL 33301

Secretary: Dr. Larry C. Wilkins

Address: 124 Isle of Venice, Apt. 2

Ft. Lauderdale, FL 33301

Treasurer: Dr. Larry C. Wilkins

Address: 124 Isle of Venice, Apt. 2

Ft. Lauderdale, FL 33301

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. Dr. Larry C. Wilkins, President

(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

STATE OF INDIANA
OFFICE OF THE SECRETARY OF STATE
CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

ELECTROMECHANICAL RESEARCH LABORATORIES INC

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on June 26, 1970, and was in existence or authorized to transact business in the State of Indiana on July 10, 2001.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand
and affixed the seal of the State of Indiana, at the
City of Indianapolis, this Eleventh Day of July, 2001.

Sue Anne Gilroy

SUE ANNE GILROY, Secretary of State

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INDIANAPOLIS, INDIANA