

4.  
F01000005088

TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CHEMENCE, INC.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign 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:

HUGH COOKE  
(Name of Person)

CHEMENCE, INC.  
(Firm/Company)

185 BLUEGRASS VALLEY PARKWAY  
(Address)

ALPHARETTA, GA, 30005  
(City/State and Zip code)

For further information concerning this matter, please call:

4000004613864--6  
-09/27/01--01070--001  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

CHRIS MORAN at (770) 664-6624 Ext. 230  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**

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

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &  
Certificate of Status

☐ \$78.75 Filing Fee &  
Certified Copy

☐ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy

FILED  
01 SEP 26 PM 9:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

mtu

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. CHEMENCE, 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. OHIO

(State or country under the law of which it is incorporated)

3. 34-1607498

(FEI number, if applicable)

4. 2/17/89

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. 2/5/01

(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 185 BLUEGRASS VALLEY PARKWAY, ALPHARETTA, GA 30005

(Principal office address)

185 BLUEGRASS VALLEY PARKWAY, ALPHARETTA, GA 30005

(Current mailing address)

8. SALES OF ADHESIVES, SEALANTS & PHOTOPOLYMERS

(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: ROB TOLLAND

Office Address: 1521 YORKSHIRE TRAIL

LAKELAND

(City)

, Florida 33809

(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.



(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.

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TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS

President: HUGH COOKE

Address: 185 BLUEGRASS VALLEY PARKWAY

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: ROBERT D. WILSON

Address: 29525 CHAGRIN BLVD, STE 203, CLEVELAND, OH 44122-4601

Treasurer: MIRANDA COOKE

Address: 185 BLUEGRASS VALLEY PARKWAY, ALPHARETTA, GA 30005

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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)

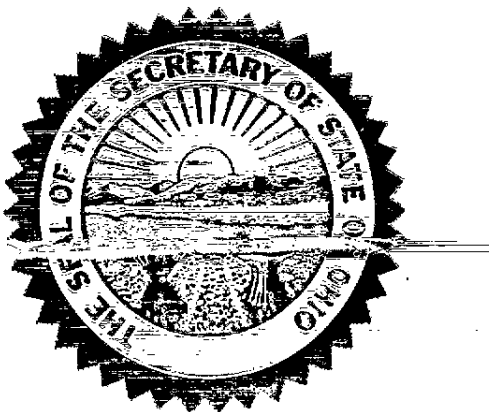
14. HUGH COOKE, PRESIDENT

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

UNITED STATES OF AMERICA,  
STATE OF OHIO,  
OFFICE OF THE SECRETARY OF STATE.

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*I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show CHEMENCE, INC., an Ohio corporation, Charter No. 743411, having its principal location in Cleveland, County of Cuyahoga, was incorporated on February 17, 1989 and is currently in GOOD STANDING upon the records of this office.*



WITNESS my hand and official seal  
at Columbus, Ohio on  
August 29, 2001

*J. Kenneth Blackwell*

J. Kenneth Blackwell  
Secretary of State

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE