F01000005799

TRANSMITTAL LETTER

TO: Registration S Division of C		· ·	2000046668 -11/05/01010	:424 n7:2017
SUBJECT: Re	sidex Corporatio	n	*****70.00	
		poration - must include s	uffix)	
Dear Sir or Madam:				
The enclosed "Applic "Certificate of Exister to transact business in	nce", and check are submitt	on for Authorization to Ted to register the above r	Fransact Business in Florida", referenced foreign corporation	1
Please return all corre	spondence concerning this	matter to the following:		
Stuart M.	Yourish			
		me of Person)		<u></u>
C/O Wester	n Industries, I	ne		
	(Fir	m/Company)		
800 Lanide	ex Plaza, P.O. Bo	ox 367		
		(Address)		
Parsippany	7, NJ 07054-0367			
		State and Zip code)		2.12.2
	` ·	• ,		
For further information	n concerning this matter, pl	ease call:		
Stuart M. Yo	nurich 4/0	73 \ 515 0100	"/	
(Name of Per		73 <u>) 515-0100</u> , Area Code & Daytime To		
	•	. ,	——————————————————————————————————————	
			ot Sec All	•
STREET ADDRESS:	}	MAILING ADD	RESS: ≧™ &	
Registration Section		Registration Sect		11
Division of Corporatio 409 E. Gaines St.	ns	Division of Corpo	orations SS 5	
Tallahassee, FL 32399)	P.O. Box 6327 Tallahassee, FL	32314 FS ≥	
		1 41144,45500, 1 15	1 8: STA: LOR	0
Enclosed is a check for	r the following amount:		: 59 TE RIDA	
₹ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee Certified Copy		11/7

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. Resid	dex Corp	oration						-			
words or al	bbreviations of	like import in	word "INCORPOR language as will cl ntained in the nam	early	indicate that	PANY", "Co	ORPORATI	ION" or ead of a			
	Jersey	up ii not 30 00	itanica in the nam	•	22-1	459626					
(State or co	untry under the	law of which i	t is incorporated)	_	<u></u>	(FEI nu	nber, if app	licable)	*		
4. 12/10		·····		5.	Perpe			ŕ			
• •	(Date of incorp	oration)			(Duration:	Year corp.	will cease to	exist or	"perpeti	ual")	
6. <u>Upon</u>	qualific	ation		<u>.</u>	·	 					
(Date first to	ransacted busin	ess in Florida. (SEE	If corporation has SECTIONS 607.1	not 1 501,	transacted b 607.1502 a	usiness in Fi nd 817.155,	lorida, inser F.S.)	t "upon q	_l ualificat	tion.")	
7. 225	[erminal	Avenue	Clark	:,]	NJ 0706	56,			_		
		-	(Principal office			. ,	- <u></u>	-	·		
<u>Talle</u>	evast Com	merce C	tr., 1144	Ta:	llevast	Rd.	Unit 1	09 &	110		
	sota, FL		(Current mailing	addr	ess)		<u> </u>	<u> </u>	<u>*V</u>		
8. Distr	ibute pe	st cont	col produc	tş							
(Purp	ose(s) of corpo	ration authoriz	ed in home state o	r cou	intry to be ca	arried out in	state of Flo	rida)	SE	01	
9. Name and	l <u>street addre</u>	<u>ss</u> of Florida	registered agei	at: (P.O. Box o	or Mail Dro	p Box <u>NO</u>	T accep	table)	Z	
Name		Riccio		<u> </u>	<u> </u>	نفار سقسد			ETAR ETAR	0V -5	FIL
Office Addre	ss: <u>Tall</u>	evast Co	ommerce Ct	r.,	<u>, 1</u> 144	Talley	ast Rd	.,Uni	五 五 五 五	თ 9 <u>-ა</u> £	H
	Sara				, Flori	da 3424	3		STA:	င်ာ ခ	<u> </u>
		(City)				(Zip c			四四	9	

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 dexistence 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 business addresses of officers and/or directors:

A. DIRECTORS					
Chairman:					
Address:					
Vice Chairman:					-
Address:					
			- <u> </u>		
Director: Stuart M. Yourish		•			-
Address: 800 Lanidex Plaza, P.O.	Box 367, P	arsippany,	NJ 07054-0	367	
				· · · · · · · · · · · · · · · · · · ·	-
Director: Richard E. Sameth				· ·	
Address:Same					
3. OFFICERS		- 4001		<u></u>	
resident: Richard E. Sameth	<u> </u>			.12	<u>.</u> Turbining
ddress: Same			SEC	3	
Daharat A. C.	<u> </u>		——————————————————————————————————————	N TI	-
ice President: Robert A. Sameth	- 				
ddress: Same		<u> </u>	SSET OF		<u>.</u>
			(2)	<u>₩</u>	
ecretary: <u>Jeanne L. Burke</u>				<u> </u>	
ddress: Same			· · · · · · · · · · · · · · · · · · ·		. :: · -
reasurer: Jeanne L. Burke				· .	
ddress: Same		<u> </u>	÷; a	4	r tear
OTE: If necessary, you may attach an addendum to	the application li	sting additional of	ficers and/or direc	tore	
3 Gehod Sameth				w.	
(Signature of Chairman, Vice Chairma	n, or any officer	listed in number 1	2 of the applicatio	n)	1. 12.71
t. <u>Richard E. Sameth, Presid</u>			• •	·	
(Typed or printed name and ca	pacity of person	signing applicatio	n)		, ∴



STATE OF NEW JERSEY DEPARTMENT OF TREASURY SHORT FORM STANDING

RESIDEX CORPORATION

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 December 10, 1946.

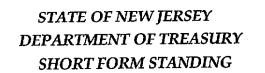
As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

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

Stuart M Yourish 800 Lanidex Plaza P O Box 367 Parsippany, NJ 07054

Continued on next page . . .

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



RESIDEX CORPORATION



IN TESTIMONY WHEREOF, I have

hereunto set my hand and affixed my Official Seal at Trenton, this 24th day of October, 2001

While Kaurance

Peter R Lawrance Acting State Treasurer

01 NOV -5 PM 8: 59
SECRETARY OF STATE
TAIL AHASSEE, FLORIDA