ACCOUNT HUMBER: FCAOOOOOOOS	st
REFERENCE: 4027793-3	/
DATE: 1-30-03	
REQUESTOR HAME: Lexis Document Services	
	3129
TELEPHONE: () () ext ()	
CONTACT HAME: EXMAN HAME	
CORPORATION NAME: CIGHTNING POWGET CHARPENT, TO CONCUMENT NUMBER: ELECTRON OF COMENGMENT by foreign	Corp.
(if applicable)	
AUTHORIZATION: Cynthin J. Woodyard	
CERTIFIED COPY (1-9) CERTIFICATE OF STATUS (1-9) PLAIN STAMPED COPY OF THE PROPERTY STAMPED COPY	; ₁ >
() Call When Roady () Call if Problem () After 4:3 () Walk In () Will Wait () Pick Up () Hail Out	0
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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 4, 2002

LEXIS

TALLAHASSEE, FL

SUBJECT: LIGHTNING POWDER COMPANY, INC.

Ref. Number: W02000003129

We have received your document for LIGHTNING POWDER COMPANY, INC. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Our records show no entity by this name.

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) 245-6903.

Cheryl Coulliette **Document Specialist**

Letter Number: 102A00006717

W0200004724 Since the above entity is not on record at SOSFL, we will file an application to transact business under the new Delaware entity where the name change was already completed.

File 1st

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIAN REGISTER A F	CE WITH SECTION 607.1503, FLORID. OREIGN CORPORATION TO TRANSAG	A Š CT I	TATUTES, THE FOLLOWING IS SUBMITTED TO BUSINESS IN THE STATE OF FLORIDAY.			
1 ARMOR HO	LDINGS FORENSICS, INC.		FE T			
words or abbre	oration; must include the word "INCORPOR eviations of like import in language as will cle or partnership if not so contained in the name	earl	ED", "COMPANY", "CORPORATION" of S	-		
2. Delaware		3.	59-3678749			
(State or countr	y under the law of which it is incorporated)	_	(FEI number, if applicable)			
4. October 12		5.	Perpetual			
(Da	ate of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")			
6. November 1	1, 2001		and the standard experience an			
(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. 13386 Inte	ernational Parkway, Jacksonvil	le,	Florida 32218			
(Principal office address) Same as above.						
(Current mailing address)						
The corporation manufactures and distributes evidence collection equipment such 8. as fingerprint products and specimen kits.						
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)						
9. Name and st	reet address of Florida registered agen	ıt:	(P.O. Box or Mail Drop Box NOT acceptable)			
Name:	LEXIS Document Services Inc.	<u>. </u>	<u>and the second of the second </u>	<i>.</i>		
Office Address:	3953 W. Kelley Road					
	Tallahassee		, Florida 32311			
	(City)		(Zip code)			
Having been nat designated in thi further agree to	is application, I hereby accept the appoi	ntn es re	ce of process for the above stated corporation at the place nent as registered agent and agree to act in this capacity. I elative to the proper and complete performance of my my position as registered agent.			
; -	LEXIS Document Services Inc.	1 /	Uvodyard, as agent, LDS			
11. Attached is a	certificate of existence duly authenticate	ed,	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: See attached officers/directors rider Address: ___ Vice Chairman: Address: Director: _ Address: Director: Address: _ B. OFFICERS President: See attached officers/directors rider Address: ___ Vice President: Address: _____ Secretary: _ Address: _ Treasurer: Address: _ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

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

14. Todd Smith, Secretary

ARMOR HOLDINGS FORENSICS, INC.

Rider of Officers and Directors

I. Officers:		OZ TAL
Name:	Office:	Address: Address:
Stephen E. Croskrey	President	13386 International Parkway Jacksonville, Florida 322
Mark Williams	Vice President and Treasurer	13386 International Parkway Jacksonville, Florida 32218
Jim Seidel	Vice President	13386 International Parkway Jacksonville, Florida 32218
Todd Smith	Secretary	1400 Marsh Landing Parkway Suite 112 Jacksonville, Florida 32250

II. Directors:

Address:
1400 Marsh Landing Parkway Suite 112 Jacksonville, Florida 32250
1400 Marsh Landing Parkway Suite 112 Jacksonville, Florida 32250
1400 Marsh Landing Parkway Suite 112 Jacksonville, Florida 32250

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ARMOR HOLDINGS FORENSICS" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTEENTH DEVIOF FEBRUARY, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ARMOR HOLDINGS FORENSICS, INC." WAS INCORPORATED ON THE TWELFTH DAY OF OCTOBER, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



Darriet Smith Windson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1617041

DATE: 02-15-02

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