



F02000001225

ACCOUNT NO. : 072100000032

REFERENCE : 441179 4312513

AUTHORIZATION :

COST LIMIT : \$ 70.00

Patricia Pizit

ORDER DATE : March 7, 2002

ORDER TIME : 2:26 PM

ORDER NO. : 441179-005

CUSTOMER NO: 4312513

800005074218--0

CUSTOMER: Mr. T. H. Thorelli
Thorelli & Associates Law
70 W. Madison St., Ste 5420
Three First National Plaza
Chicago, IL 60602

FOREIGN FILINGS

NAME: FOILEX, INC.

(Handwritten mark)

BK

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson -- EXT# 1155

EXAMINER: _____

RECEIVED
02 MAR -8 PM 2:56
DIVISION OF CONSUMER
PROTECTION
TALLAHASSEE, FLORIDA

FILED
02 MAR -8 AM 9:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FOILEX, 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:

Thomas H. Thorelli

(Name of Person)

Thorelli & Associates

(Firm/Company)

70 W. Madison St. Suite 5420

(Address)

Chicago, IL 60602

(City/State and Zip code)

For further information concerning this matter, please call:

Thomas H. Thorelli

(Name of Person)

at (312) 357-0300

(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

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MAR - 8 AM 9:47
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TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

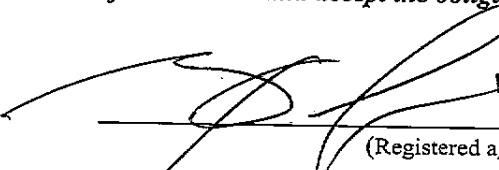
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

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TALLAHASSEE, FLORIDA

1. FOILEX, 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. Delaware
(State or country under the law of which it is incorporated)
3. 36-4489554
(FEI number, if applicable)
4. February, 19, 2002
(Date of incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification
(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. 16300 NE, 19th Ave. Suite 100, North Miami Beach, FL 33162
(Principal office address)
70 W. Madison St. #5420, Chicago, IL 60602
(Current mailing address)
8. Any lawful activity
(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: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(City) (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.


Brian Courtney
Asst. V. Pres.

(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 business addresses of officers and/or directors:

A. DIRECTORS

Chairman: None

Address: _____

Vice Chairman: None

Address: _____

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TALLAHASSEE, FLORIDA

Sole Director: Anders Johansson

Address: Saterigatan 25, 417 64 Gothenburg Sweden

Director: _____

Address: _____

B. OFFICERS

President: Anders Johansson

Address: Saterigatan 25, 417 64 Gothenburg Sweden

Vice President: None

Address: _____

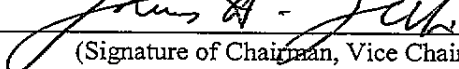
Secretary: Thomas H. Thorelli

Address: 70 W. Madison St. #5420, Chicago, IL 60602

Treasurer: Anders Johansson

Address: Saterigatan 25, 417 64 Gothenburg Sweden

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. Thomas H. Thorelli, Secretary
(Typed or printed name and capacity of person signing application)

Delaware

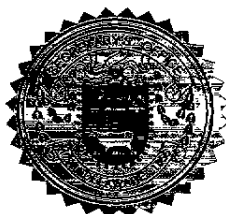
PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FOILEX, INC." 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 SEVENTH DAY OF MARCH, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

FILED
2002 MAR -8 AM 9:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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020154737

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1651348

DATE: 03-07-02