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CORPORATION(S) NAME

Pucuda, Inc.		
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660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN	COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO						
KI	GISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA						
1.	Pucuda, 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.	Connecticut (State or country under the law of which it is incorporated) (State or country under the law of which it is incorporated) (FEI number, if applicable)						
	Connecticut 3. 06-1352014 (State or country under the law of which it is incorporated) (FEI number, if applicable)						
4.	September 2, 19 92 Perpetual 5.						
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.)						
	500 Main Street Deep River, CT 06417						
7.							
	(Principal office address) PO Box 1019 Deep River, CT 06417						
	(Current mailing address) Manufacturing netting						
8.							
	(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: CT Corporation System						
Office Address: 1200 South Pine Island Road							
_	XXXXX ————————————————————————————————						
Plantation , Florida 33324 (Circ) (Zip code)							
	(City) (Zip code)						
H	Registered agent's acceptance: aving been named as registered agent and to accept service of process for the above stated corporation at the place						
di fr	esignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I writher agree to comply with the provisions of all statutes relative to the proper and complete performance of my						
đ	tties, and I am familiar with and accept the obligations of my position as registered agent.						
Kobu Lew							
	(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 busine	ss addresses of officers and/or directors:	0,
A. DIRECTORS		ESC T
Chairman:	John Rexroad	
Address:	500 Main Street	200 C
	Deep River, CT 06417	70
Vice Chairman:		Site of
		•
Director:		
B. OFFICERS		
President:	John Rexroad	
Address:	500 Main Street	
	Deep River, CT 06417	
Vice President:		
		- P-W
Secretary:	Mario Lupone	
Address:	500 Main Street Deep River, CT 064	417
Treasurer:		
Address:		
NOTE: If necessary,	ou may attach an addendum to the application listing additional of	fficers and/or directors.
13	ure of Chairman, Vice Chairman, or any officer listed in number 1	(2 of the application)
Loignat	John Rexroad, President	ьг от ніе аррисаціоп)

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

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State and keeper of the seal thereof, DO HEREBY CERTIFY, that

PUCUDA, INC.

incorporated under the laws of Connecticut is in existence.

Secretary of the State

Date Issued: February 22, 2002