

	Registration Section Division of Corpo			<b>Ø</b>		
SUBJE	CT: Wes	tport Corporati	on	U	14	HLM
20202		(Name of co	rporation - must in	iclude suffix)	1	· 0 0 0
Dear Sir	or Madam: OO	855-003/1	D-029U	3	W02-1	4930
"Certific		n by Foreign Corporat and check are submi rida.			Business in Florid	a´´,
Please re	eturn all correspon	dence concerning thi	s matter to the foll	owing:		
	Kin	berly A. Bougas	, Controller	30	000555 -05/16/02-	
-		(1)	fame of Person)	······································		<del>D *****</del> 87.5
	Wes	tport Corporati	on			
	<del></del> .	(F	irm/Company)		v	
	331	Changebridge F	.oad			
			(Address)			
	Pin	e Brook, NJ 07	058			
		<del></del>	/State and Zip cod	ie)		
		` '	•	•		
For furth	er information co	ncerning this matter,	please call:			
K	im Bougas	at (	973 575	-0110	FALL FALL	02
	(Name of Person)		973 ) 575 (Area Code & Da	ytime Telephone	Number)	
					<b>み</b> 素	7 E
Registrate Division 409 E. G	T ADDRESS: tion Section of Corporations daines St. see, FL 32399		Registrat Division P.O. Box	IG ADDRESS: tion Section of Corporations a 6327 see, FL 32314	Y OF STATE SEE FLORIDA	-4 AM 9: 10
Enclosed	is a check for the	following amount:				
□ \$70.0	0 Filing Fee C	J \$78.75 Filing Fee & Certificate of State			5 \$87.50 Filing F Certificate of S	Status &



## FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

May 22, 2002

KIMBERLY A. BOUGAS, CONTROLLER WESTPORT CORPORATION 331 CHANGEBRIDGE ROAD PINE BROOK, NJ 07058

SUBJECT: WESTPORT CORPORATION

Ref. Number: W02000014920

We have received your document for WESTPORT CORPORATION and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

Please return 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) 245-6967.

Michelle Hodges Document Specialist

Letter Number: 202A00033041

# RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned	Joseph J. Bo	odnar (Name)	, do hereby certi	fy .	
that this Resolution of the	e Board of Directors	of Westp	oort Corporation		
· · · · · · · · · · · · · · · · · · ·	(Co	orporate Name)			
a corporation duly organi	zed and existing und	ler the laws of the Stat	te of <u>New Jersey</u>	_,	
was duly adopted on	Ma	ny 31	, 2002	S. S.	
Be it resolved, that	Westport C				إسب
organized and existing in	the State of New		i i	31/fs 15/2891. 01:6 HV 1-1	
Dated: 5/31/02	<u>. :</u>		A CONTRACTOR OF THE CONTRACTOR	m O	÷ ÷
	1	A. God of Chaimnan, Vice Chai	,		
	Jos	eph J. Bodnar Type or print name	EVP/CFO	·	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

INHS19(1/00)

# 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. Westpo	rt Corp	oration				
words or abbrev	riations of I	it include the word "INCORPOR ike import in language as will cl ip if not so contained in the nam	early	D", "COMPANY", "CORPORATIO indicate that it is a corporation instea resent.)	N" or d of a	٠
2. New Je	rsey		3.	22-1838553		
(State or country	under the	law of which it is incorporated)	_ ~ .	(FEI number, if applic	able)	-
4.			5.	perpetual		
(Date	e of incorpo	oration)		(Duration: Year corp. will cease to e	xist or "perpetual")	
6. upon qu	ualifica	ation				
		ess in Florida. If corporation has (SEE SECTIONS 607.1 dge Rd., Pine Brook,	501,	ransacted business in Florida, insert "607.1502 and 817.155, F.S.)	'upon qualification.")	
/		(Principal office		M		
		(x xmorpus office	addi	<i>aa)</i>		
	<del>"</del>	(Current mailing	addre	ss)		
					OS TAL	
· <del></del>		ding out of home				
(Purpose(	s) of corpor	ration authorized in home state of	r cou	ntry to be carried out in state of Flori	da)	
9. Name and stre	eet addre	ss of Florida registered age	nt: (	P.O. Box or Mail Drop Box <u>NOT</u>	_acceptable)	-
Name:	Beth	Natoli				
Office Address:	19101	Skyridge Circle			9: 10 STATE LORIDA	
	Boca	Raton		, Florida 33498		
•		(City)		(Zip code)		
designated in this further agree to c	ed as regi application omply wit	istered agent and to accept s on, I hereby accept the appo th the provisions of all statut	intm es re	e of process for the above stated ent as registered agent and agree lative to the proper and complete my position as registered agent.	to act in this capaci	itv. I
_		(Registered agent	's sign	nature)		

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:	- a la
Address:	- :-
	<del></del> .
Vice Chairman:	<del></del>
Address:	_
Additions.	
	<del>-</del>
Director:	<b>–</b> -
Address:	
	<del></del> . <del>-</del>
Director:	<del></del>
Address:	<del>-</del> ,
	<del>-</del>
B. OFFICERS	
per attached President:	
	<del>-</del> →•
Address:	* · · · ·
per attached	<del></del> -
Vice President:	<b>-</b>
Address:	
	<del></del>
Per attached Secretary:	<del></del>
Address:	<del></del> .: .
Treasurer: per attached	
Address:	<del>_</del> :
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	_
13. Jung Hon	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	:.
14. Richard Florin, Chairman/CEO  (Typed or printed name and capacity of person signing application)	 <u>140</u>
I I VNEG OF DYDIEG TISTIC AND CADACITY OF DOISON SIGNING ADDITIONAL	

# **Westport Corporation Officers**

#### Richard Florin

50 Oak Bend Rd Llewellyn Park West Orange, NJ 07052 Chairman/CEO

#### J Kevin Ross

37 Crawford Rd. Westport, CT 06880 President

### Joseph J Bodnar

95 Blackstone Rd Port Reading, NJ 07034 Exec VP-CFO

#### John Florin

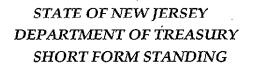
52 Athens Rd. Short Hills, NJ 07078 Vice President

#### Jane Florin Langendorff

16 Vincent Lane Short Hills, NJ 07078 Vice President

#### Thelma Florin

50 Oak Bend Rd Llewellyn Park West Orange, NJ 07052 Secretary



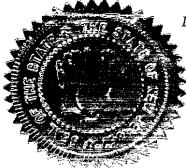
#### WESTPORT CORPORATION

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 January 22, 1968.

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:

Richard Florin 331 Changbridge Road Pine Brook, NJ 07058



IN TESTIMONY WHEREOF, I have

hereunto set my hand and affixed my Official Seal at Trenton, this 2nd day of May, 2002

Johnerdenne

John E McCormac, CPA

State Treasurer