## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# F02000005535

City-St-Zip:

EAGAN, MN 55121

FILED Oct 26, 2007 Secretary of State

Entity Name: TMI COATINGS, INC. **Current Principal Place of Business: New Principal Place of Business:** 3291 TERMINAL DRIVE EAGAN, MN 55121 **Current Mailing Address: New Mailing Address:** 3291 TERMINAL DRIVE EAGAN, MN 55121 FEI Number: 41-1528126 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM NRAI SERVICES, INC 1200 SOUTH PINE ISLAND ROAD 2731 EXECUTIVÉ PARK DRIVE PLANTATION, FL 33324 SUITE 4 WESTON, FL 33331 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: SUE JOHNSON, ASST SECRETARY 10/26/2007 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition GLIORI, TRACY M Name: Name: 3291 TERMINAL DRIVE Address: Address: City-St-Zip: EAGAN, MN 55121 City-St-Zip: Title: Title: () Change () Addition () Delete Name: GLIORI, TRACY M Name: 3291 TERMINAL DRIVE Address: Address: EAGAN, MN 55121 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition ANDERSON, JOHN M Name: Name: 3291 TERMINAL DRIVE Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: JOHN ANDERSON SEC 10/26/2007