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SECRETARY OF STAIL



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

October 28, 2002

ART WILSON 8630 BROADWAY AVENUE JACKSONVILLE, FL 32254

SUBJECT: C.F.GOMMA U.S.A., INC.

Ref. Number: W02000030941

We have received your document for C.F.GOMMA U.S.A., INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The registered agent must sign accepting the designation.

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) 245-6097.

Letter Number: 302A00059166

Marsha Thomas Document Specialist



October 24, 2002

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Attached is the required paperwork and check for Application by Foreign Corporation for Authorization to transact business in Florida.

Sincerely,

Art Wilson

Director Administration

TRANSMITTAL LETTER

TO: Registration Section Division of Corpo							
SUBJECT: CF Go	mma, USA, Inc.						
Sobolic 1.		oration - must include surfix)				
Dear Sir or Madam:							
	, and check are submitte	n for Authorization to Trans d to register the above refer					
Please return all correspon	ndence concerning this r	natter to the following:					
Art Wilson							
	(Na:	ne of Person)	Aσ				
C F Gomma, USA,	Inc.		1. P.				
(-430 6630 Broadway Av	,	n'Company)	HASS				
	(Address)	76				
Jacksonville, Florid	8 32254		7, 3 1				
	(City/S	state and Zip code)	9: 09				
For further information co	oncerning this matter, pl	ease call:					
Art Wilson	MILL "	<u> </u>	xt. 11				
(Name of Person	(4	Area Code & Daytime Telej	phone Number)				
STREET ADDRESS:		BEATE THE ATTRIBUTE	eac.				
Registration Section		MAILING ADDRE Registration Section					
Division of Corporations 409 E. Gaines St.		Division of Corpora	Division of Corporations				
Tallahassee, FL 32399	P.O. Box 6327 Tallahassee, FL 323	314					
Enclosed is a check for th	e following amount:						
2 \$70.00 Filing Fee	C \$78.75 Filing Fee & Certificate of Status	3 \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy				

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.	C F Gom	ma, USA, Inc.					
	words or abbre	oration; must include the word "INCORI viations of like import in language as wi or partnership if not so contained in the	ll clearly i	ndicate that it	NY", "CORPORATION is a corporation instead	l" or of a	
2.	Indiana	_	3_	35-203587	79		
	(State or country	y under the law of which it is incorporate	:d)		(FEI number, if applica	ible)	_
4.	1998		5	perpetu	al	•	
	(Da	te of incorporation)		Duration: Ye	ar corp. will cease to ex	ist or "perpetual")
6.	upon qua	alification					
	(Date first trans	acted business in Florida. If corporation (SEE SECTIONS 6				ipon qualification.	.")
7.	643 Wes	t Ellsworth Street, Columbia C	ity, IN	46725		~	
•	· · · · · · · · · · · · · · · · · · ·	(Principal of	fice addre	ss)	_ 	F S	_ G
	6630 Bro	padway Avenue, Jacksonville, I	FL 322	54		52	~~ >~
		(Current mail	ing addre	ss)		A	₹ T
8.	Manufactu	re of Brake Assemblies				RY O	T STATES
		(s) of corporation authorized in home sta		•		(C) (C)	
9.	. Name and st	reet address of Florida registered :	igent: (I	P.O. Box or I	Mail Drop Box <u>NOT</u>	acceptable)	
	Name:	Ludwig & Bunn, P.A.	<u> </u>	÷	:	A	
0	ffice Address:	5150 Belfort Road S., Blo	ig. 500	<u>) </u>			
		Jacksonville,		, Florida	32256		
		(City)		<u> </u>	(Zip code)		
10	0. 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.

(Rogistered agent's signature) Jeffrey R, Ludwig, As President

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. I	Vagnes.	and	business	addresses	υf	officers	and/or	directors:
-------	---------	-----	----------	-----------	----	----------	--------	------------

A. DIRE	CTORS Mario Cancarini			
	Via S. Antonio, 59, 1-25050 Passirano (Bs) Italy			
	man:			
Address:				
Director:	Renato Faita		· · · · · · · · · · · · · · · · · · ·	
Address:	Via S. Antonio, 59, 1-25050 Passirano (Bs) Italy			
Director;	Cecil Fugate		· <u>·</u> ······	
Address:	643 West Ellsworth St., Columbia City, IN 46725			
B. OFFI		TALLEA		
President:	Paolo Cingia Vio S. Antonio 50, 1.25050 Pagairma (Pa) Halt	- AK	100	
Address:	Via S. Antonio, 59, 1-25050 Passirano (Bs) Italy	H.C.	<u>5</u>	-
Vice Presi	dent: Pierfedrico Cancarini	537	9.	
	Via S. Antonio, 59, 1-25050 Passirano (Bs) Italy	<u> </u>	9	
Secretary:	Andrea Forzi			
	Via S. Antonio, 59, 1-25050 Passirano (Bs) Italy			
Treasurer				
Address:				
	If necessary, you may attach an addendum to the application listing additional officers and/o	or directo	FŠ.	
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the ap	plication)		
14	ecil Fugate, General Manager USA Director			

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper office to execute this certificate.

I further certify that records of this office disclose that

C.F. GOMMA U.S.A., INC.

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on January 29, 1998, and was in existence or authorized to transact business in the State of Indiana on October 22, 2002.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Twenty-Second day of October, 2002.

SUE ANNE GILROY, Secretary of State

Sue anne Hilry