

F020000006013

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

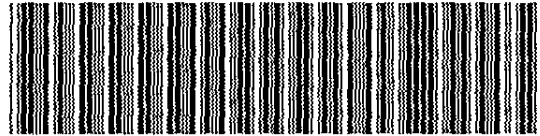
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/04/02--01028--018 **70.00

RECEIVED

02 DEC -4 AM 11:14

FILED

02 DEC -4 PM 1:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BK

4

m02000002984

CT CORPORATION SYSTEM

December 4, 2002

Secretary of State, Florida
409 East Gaines Street
N/A
Tallahassee FL 32399

02 DEC -4 PM 1:47
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: Order #: 5732606 SO
Customer Reference 1:
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

ASML US, Inc. (DE)
Qualification
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at
(850) 222-1092. Thank you very much for your help.

Sincerely,

Jeffrey J Netherton
Sr. Fulfillment Specialist
Jeff_Netherton@cch-lis.com

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

FILED
OCT -4 PM 1:47
CLERK OF DISTRICT COURT
STATE OF FLORIDA

1. ASML US, Inc.

2 Delaware

3. 77-0568140

4. September 28, 2000

5. perpetual

6. December 31, 2002

7. 8555 South River Parkway

Tempe AZ 85284

8. Capital equipment sales and service

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

Florida 33324

(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.

CT Corporation System

(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 addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: Doug Dunn

Address: DeRun 1110, 5503 LA Veldhoven, The Netherlands

Vice Chairman: _____

Address: _____

Director: Peter T.F.M. Wennink

Address: DeRun 1110, 5503 LA Veldhoven, The Netherlands

Director: Stuart K. McIntosh

Address: DeRun 1110, 5503 LA Veldhoven, The Netherlands

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: David Chavoustie

Address: 8555 South River Parkway

Tempe AZ 85284

Vice President: _____

Address: _____

Secretary: Robert Roelofs

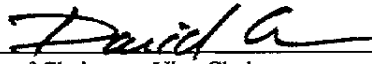
Address: DeRun 1110, 5503 LA Veldhoven, The Netherlands

Treasurer: Christina Tukker

Address: 8555 South River Parkway

Tempe AZ 85284

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. David Kim, Assistant Secretary
(Typed or printed name and capacity of person signing application)

FILED
DEC - 4 PM 1:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name	Title	Business Address
David Kim	Assistant Secretary	8555 South River Pkwy Tempe AZ 85284

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02 DEC -4 PM 1:47
SCHOOL OF STATE
TALLAHASSEE, FLORIDA

Delaware

PAGE 1

The First State

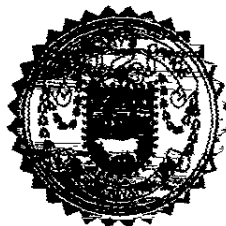
I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ASML US, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF NOVEMBER, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

02 DEC -4 PM 1:47
SECRETARY OF STATE
ALABAMA, FLORIDA

FILED



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

3294667 8300

AUTHENTICATION: 2115068

020733342

DATE: 11-27-02