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(Requestor's Name) (Address)	400013261
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL	
(Business Entity Name) (Document Number)	U3/11/03U1042
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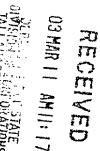
GEGRETARY OF STATE FALLAHASSEE, FLORIDA



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CT CORPORATION

FILED 03 MAR 17 PM 2: 10

SECRETARY OF STATE TALLAHASSEE, FLORIDA

March 11, 2003

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

Re: Orde

Order #: 5785394 SO

Customer Reference 1: Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

DEAN DISTRIBUTORS, INC. (CA) 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,

Brigham Weir

Fulfillment Specialist

Brigham_Weir@cch-lis.com

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



Secretary of State

FILED 03 MAR 17 PM 2: 10

EGRETARY OF STATE TALLAHASSEE, FLORIDA

March 11, 2003

CT CORPORATION 660 E. JEFFERSON STREET TALLAHASSEE, FL 32301

SUBJECT: DEAN DISTRIBUTORS, INC.

Ref. Number: W03000006999

We have received your document for DEAN DISTRIBUTORS, INC. and your check(s) totaling \$70.00. 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 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) 245-6094.

Letter Number: 503A00015314

Agnes Lunt Document Specialist

Division of Corporations - P.O. ROY 6327 -Tallahassee, Florida 32314

CT CORPORATION

FILED

03 MAR 17 PM 2: 10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

March 17, 2003

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

Re:

Order #: 5785394 SO

Customer Reference 1:

Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

DEAN DISTRIBUTORS, INC. (CA) Ralph E. Shulz, Inc. 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,

Brigham Weir

Fulfillment Specialist

Brigham_Weir@cch-lis.com

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

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LEUNETARY OF STATE
TALLAHASSEE, FLORIDA

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned Ralph E. Schulz, do hereby certify (Name)
that this Resolution of the Board of Directors of Dean Distributors, Inc.
-1350 Bayshore Highway, #400 Burlingame CA 94011
a corporation duly organized and existing under the laws of the State of Calc. Sima,
was duly adopted on July 1, 1959
Be it resolved, that Dean Distributors, Inc. (Corporate Name)
organized and existing in the State of California, hereby adopts the name
Ralph E Schulz, Inc. for use in Florida.
Dated: 3/12/2003
Signature of either Chairman, Vice Chairman or any officer
Ralph E. Schulz, President
Type or print name

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

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACTILED BUSINESS IN FLORIDA 03 MAR 17 PM 2:

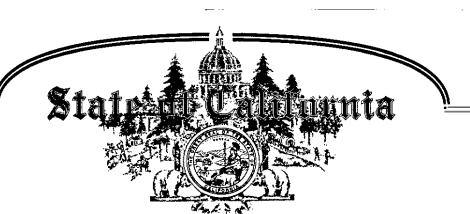
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO LICENTARY OF STA REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. IALLAHASSEE, FLO Dean Distribitors, Inc.

(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.) Repetuat ~

(Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) (Current mailing address) (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 Plantation (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. orporation System NASEEM A. CONDE SPECIAL ASST. SECRETARY (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.

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)	FILED
Chairman:	03 MAR 17 PM 2: 10
Address:	SECRETARY OF STATE
	TALLAHÁSSEE, FLORIDA
Vice Chairman:	
Address:	<u></u>
	<u></u>
Director:	·
Address:	
Director:	
Address:	
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	<u> </u>
President: Ralph E Schulz	<u> </u>
Address: 1350 Bayshore Highway	
Burlingame CA 94010	gran and the state of the state
and M Calable	
Address: 1350 Bayshore Highway	
Bullingame CA 94010	
Secretary: Barbara J. Schulz	
Address: 1350 Bayshore Highway	
Builingame CA 94010	
Treasurer:	
Address:	<u> </u>
	<u> </u>
NOTE: If necessary, you may attach an addendum to the application listing addition	onal officers and/or directors.
13 Barbarasahula	
(Signature of Chairman, Vice Chairman, or any officer listed in nur	imber 12 of the application)
14. Barbara Schulz, Secretary (Typed or printed name and capacity of person si	igning application)



03 MAR 17

DEUKETARY TALLAHASSE

SECRETARY OF STATE

CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, KEVIN SHELLEY, Secretary of State of the State of California, hereby certify:

That on the 1st day of July, 1959, DEAN DISTRIBUTORS, INC. became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of February 13, 2003.

KEVIN SHELLEY Secretary of State