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FOREIGN PROFIT QUALIFICATION

its on Corporation

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LYISION OF CORPORATION

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COMPONENT PHILLIPS

Public Accessor Hair

APPLICATION BY FOREIGN CORFORATION 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.	its.on Corpora	ution							_		
		f corporation; must include 'Corp," "Inc," "Co," or "Co		D,"	"COMPANY,	" "CORPORA"	rion,"		_		
	(If name unave	silable in Florida, enter alt	erdate corporate nas	nė a	dopted for the p	surpose of trans	acting busin	ess in Florida)		
	Delaware			3. 3	22-3845294	··· <u>·</u>			_		
	(State or countr	y under the law of which	it is incorporated)			(FEI number, if	abblicapie)				
4.	10/12/01			5	perpeta	al			_		
	(Da	ite of incorporation)			(Duration: Yes	ır osırp. will ce t	se to exist o	r "perpetual")	•		
6.	upon qualifica	tion									
;	(Date first trans	acted business in Florids. (SRE	If corporation has SECTIONS 607.15				nseri ^s upon	qualification.	•	2	
7	379 Interpace i	Parkway, P.O. Box 677, Pr	usippany, NJ 07054	i-06	77				EB	7	ري. ري.
_	· · · · · · · · · · · · · · · · · · ·		(Principal office a	ddre	(255)		<u></u> ,		圣器	04 FEB 17	
	379 Interpace P	Parkway, P.O. Box 677, Pa	raippany, NJ 07054	-067	77		٠		SA	<u></u>	一子
			(Current mailing a	ddre	css)		-		- SES	至	
									77.0	بو	
8.		I support to customers whi						it	- 0815 0815	39	··· , ,
	(Purpose	(s) of corporation authoriz	ed in home state or	COU	intry to be carrie	ed out in state of	(Florida)		EF	4	
9.	Name and st	reet address of Florids	registered ageni	: (1	P.O. Box or M	ail Drop Box	NOT accer	table)	1.		
		CT Corporation System	-	·		-		_			
	Name:	O I Corporation Dysicin					-				
Of	fice Address:	1200 South Pine Island F	inad					_			
		Plan	itati on		. Florida	33324				~	
		(City)			, 1 2000 tree _	(Zip code)	•				
	W					/ A A.					
		agent's acceptance;	and to marge		a akananasa ta	- dh h			t		
 		med as registered opens	mine in arment is:	VALE	e at hinress to	. We nouse In	иви согрог	amon at the	piace_		

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 JOYCE A GILBERT ESCHIAG RECKETA flew By: (egistered agent's Signature)

11. Attached is a cartificate 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: See Attached		
Address:	-	
	·	
Vice Chairman:	.	
Address:		
Director.		
Address:		
Director:		
Address:		
B. OFFICERS		
Address:		
	ASS #	
Vice President:		
Address:	B III	17
	SSE	
Socretary;		_
	SP W	
Address;	7	
Treasurer		
Address:		
NOTE: If necessary, you may attach an addendum to the application list	ring additional officers and/or directors	
De- 1 Man	më phadolist atmesis smalt autenus	
(Signature of Director or Officer listed in number 12 of the	he application)	
14. Peter A. Vinocur, Vice President & Secretary		

(Typed or printed name and capacity of person signing application)

its.on Corporation - Officers & Directors

Title	
Name	
Position Type	

President 379 Inferpace Parkway Parsippany, NJ 07054-0677 Burkhard Armonat

Officer

Officer

Peter A. Vinocur

Beachwood, OH 44122-5554

Vice President & Secretary 23700 Chagrin Blvd.

Director Thomas Suessmelr Director

Goldschmidtstrasse 100

Germany 45127 Essen

Director Peter ₹. Knopf

Director

379 Interpace Parkway Parsippany, NJ 07054-0677

379 Interpace Parkway Parsippany, NJ 07054-0677

Burkhard Armonat

Director

Director

Director

Jochen Gintzel

Director

Essen Tor 3,

Gertlingstrasse 65

Essen

Germany 45127

04 FEB 17 AM 9: 39 SECRETARY OF STATE TALLAHASSEE, FLOPIDA

Delaware PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ITS.ON CORPORATION" 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 THIRTEENTH DAY OF FEBRUARY, A.D. 2004.

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.

Harriet Smith Windson, Secretary of State

AUTHENTICATION: 2931288

DATE: 02-13-04