

F040000 06345

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

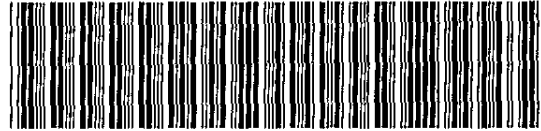
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SEATTLE, WA

CT CORPORATION

November 8, 2004

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

FILED
04 NOV -9 PM 12:23
RECEIVED
TALLAHASSEE, FLORIDA

Re: Order #: 6231101 SO
Customer Reference 1:
Customer Reference 2:

Dear Department of State, Florida:

Please obtain the following:

~~Tropical Shipping, Inc. (DE)~~
~~Qualification~~
Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

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

Sincerely,

Jennifer Murphy
Fulfillment Specialist
Jennifer_Murphy@cch-lis.com

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

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE
FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO
TRANSACTION BUSINESS IN THE STATE OF FLORIDA.

1. TROPICAL SHIPPING, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY,"
"CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of
transacting business in Florida)

2. DELAWARE

(State or country under the law of which it is incorporated) (FEI number, if applicable)

3. 65-0157054

4. 10/16/89

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Date of Registration

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 4 East Port Road, Riviera Beach, FL 33404

(Principal office address)

4 East Port Road, Riviera Beach, FL 33404

(Current mailing address)

8. All Lawful Purposes

(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 NOT acceptable)

Name: **CT Corporation System**

Office Address: **1200 South Pine Island Road
Plantation, Florida 33324**

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.

04 NOV -8
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TALLAHASSEE, FLORIDA



PETER F. SOUZA
ASSISTANT 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.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Russ M. Strobel

Address: 1844 Ferry Road, Naperville, IL 60563

Director: Richard Murrell

Address: 4 East Port Road, Riviera Beach, FL 33404

Director: Thomas M. Black

Address: 4 East Port Road, Riviera Beach, FL 33404

Director: R. Mark Chapman

Address: 4 East Port Road, Riviera Beach, FL 33404

B. OFFICERS

President: Richard Murrell

Address: 4 East Port Road, Riviera Beach, FL 33404

Sr. Vice President: Thomas M. Black

Address: 4 East Port Road, Riviera Beach, FL 33404

Secretary: Thomas M. Black

Address: 4 East Port Road, Riviera Beach, FL 33404

Treasurer: Thomas M. Black

Address: 4 East Port Road, Riviera Beach, FL 33404

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. - SEE ATTACHMENT

13.

(Signature of Director or Officer listed in number 12 of the application)

14. **Ruben Spitzrad, Assistant Secretary**

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

OFFICERS, CONTINUED

Vice President:	R. Mark Chapman 4 East Port Road, Riviera Beach, FL 33404
Vice President:	L. Philibert LaPlace 4 East Port road, Riviera Beach, FL 33404
Vice President:	Douglas V. Koban 4 East Port Road, Riviera Beach, FL 33404
Vice President/ Controller:	James C. Vander Biezen 4 East Port Road, Riviera Beach, FL 33404
Assistant Secretary	Ruben Spinrad 4 East Port Road, Riviera Beach, FL 33404

Delaware

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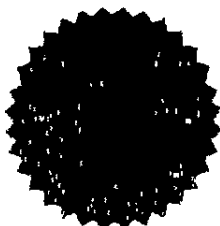
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TROPICAL SHIPPING, 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 FIFTH DAY OF NOVEMBER, A.D. 2004.

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

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TROPICAL SHIPPING, INC." WAS INCORPORATED ON THE SIXTEENTH DAY OF OCTOBER, A.D. 1989.



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

2210690 8300

AUTHENTICATION: 3458912

040800395

DATE: 11-05-04