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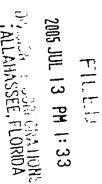
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#### TRANSMITTAL LETTER

	FO: Registration Section Division of Corporations					
SUBJE	CT. Brambles	North America Inc	orporated			
SCB0E.	C1			n - must include suffix	()	
Dear Sir	or Madam:					
"Certific		," and check are su		Authorization to Trans egister the above refer		
Please re	turn all correspo	ondence concerning	this matter	to the following:		
Kelly A. I	Howley		<u> </u>			
			(Name of	Person)		<b>E B</b>
Kilpatrick	Stockton LLP				į	<b>.</b>
			(Firm/Co	npany)		E T
1100 Pea	achtree Street, S	Suite 2800				13 T
			(Addr	ess)		SE P
Atlanta, 0	GA 30309-4530					五学
		•	(City/State a	and Zip code)		ORIDA ORIDA
For furth	er information c	oncerning this mat	ter, please c	all:		-
Keily Hov	wley	at	(404	815-6328		
(	(Name of Persor			Code & Daytime Telep	hone Number)	<del></del>
F L 4	STREET ADDING Segistration Section of Corp 109 E. Gaines St. Callahassee, FL	tion orations		MAILING A Registration Division of 6 P.O. Box 63 Tallahassee,	Section Corporations 27	
Enclosed	is a check for the	ne following amour	nt:			
□ \$70.00	0 Filing Fee	☐ \$78.75 Filing F Certificate of		\$78.75 Filing Fee & Certified Copy		Filing Fee, eate of Status & ed 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.	Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"			
		orp," "Inc," "Co," or "Corp.")	ω,	COMPANT, CORPORATION,
	(If name unavails	able in Florida, enter alternate corporate nar	ne	adopted for the purpose of transacting business in Florida)
2.	Delaware		3.	13-3100503
	(State or country	under the law of which it is incorporated)		(FEI number, if applicable)
4.	11/20/1981		5.	perpetual
	(Date	of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")
6.	upon qualif	Eication		د من ا
				n Florida, if prior to registration) 502, F.S., to determine penalty liability)
7.	180 Technolo	ogy Parkway, Room 600, Norcros	s,	GA 30092
٠.,	<u></u>	(Principal office a	dd	· · · · · · · · · · · · · · · · · · ·
	180 Technolo	ogy Parkway, Room 600, Norcros	;s,	, GA 30092
		(Current mailing a	dd	
				Oak 33
8.	holding com	<u> </u>		77
	(Purpose(s	f) of corporation authorized in home state or	, cc	ountry to be carried out in state of Florida)
9.	Name and stree	et address of Florida registered agent: (F	.C	D. Box NOT acceptable)
	Name:	C T Corporation System		<u></u>
O:	ffice Address:	1200 South Pine Island Road		
		Plantation		, Florida 33324
		(City)		(Zip code)
10	). Registered as	gent'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.

By: JOAN BOLDEN

(Registered agent's signature) ASSISTANT SECRETARY

- 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: See attached	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	三 三 三 三
Address:	SSC 3
B. OFFICERS	FLORIDA PLORIDA
President: See attached	
Address:	
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the applicat	ion listing additional officers and/or directors.
13. (Signature of Director or Officer listed in nu	mber 12 of the application)
George D. Nelson, III, Vice President	

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

#### BRAMBLES NORTH AMERICA INCORPORATED

#### Officers and Directors

Name:	<u>Title:</u>	Address:
Melissa L. Schmidt	President, Vice President – Tax & Director	180 Technology Parkway Room 600 Norcross, GA 30092
George D. Nelson, III	Vice President, Secretary, Treasurer & Director	Norcross, GA 30092  180 Technology Parkwar Room 600 Norcross, GA 30092  8517 South Park Circle Orlando, FL 32819-9040  1 Macquarie Place
T. Douglas Duskin	Director	8517 South Park Circle Orlando, FL 32819-9040
Jasper Judd	Director	1 Macquarie Place Level 40, The Gateway Sydney, NSW 2000 Australia
Kerry Porritt	Director	57-59 St. James' Street London, SW1ALD, England
Jason Mordler	Assistant Secretary	180 Technology Parkway Room 600 Norcross, GA 30092
Kelly Howley	Assistant Secretary	1100 Peachtree Street Suite 2800 Atlanta, GA 30309
Daniel T. Falstad	Assistant Secretary	1100 Peachtree Street Suite 2800 Atlanta, GA 30309

## Delaware

PAGE 1

### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BRAMBLES NORTH AMERICA INCORPORATED" 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-NINTH DAY OF JUNE, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BRAMBLES NORTH AMERICA INCORPORATED" WAS INCORPORATED ON THE TWENTIETH DAY OF NOVEMBER, A.D. 1981.

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.

FILE DAY 1: 33



Warriet Smith Windson Secretary of State

AUTHENTICATION: 3986879

DATE: 06-29-05

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