

Florida Department of State
Division of Corporations
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Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
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FOREIGN PROFIT/NONPROFIT CORPORATION

Original Smith Printing, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
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**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. Original Smith Printing, 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. Minnesota 3. 41-1986764
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 09/06/00 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1725 Roe Crest Drive, North Mankato, MN 56003
(Principal office address)
1725 Roe Crest Drive, North Mankato, MN 56003
(Current mailing address)

8. Any and all lawful business in which corporation may engage in the state.
(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
(City) (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.

By: Michael Miller C T Corporation System
(Registered agent's signature) Michela Miller
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.

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

A. DIRECTORS

Chairman: _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: _____

Address: _____

Director: Jean TaylorAddress: 1725 Roe Crest DriveNorth Mankato, MN 56003Director: Bradley SchreierAddress: 1725 Roe Crest DriveNorth Mankato, MN 56003

B. OFFICERS

President: Rockie ZeiglerAddress: 1725 Roe Crest DriveNorth Mankato, MN 56003Vice President: Joseph KeenanAddress: 1725 Roe Crest DriveNorth Mankato, MN 56003Secretary: Gregory W. JacksonAddress: 1725 Roe Crest Drive, North Mankato, MN 56003Treasurer: Thomas JohnsonAddress: 1725 Roe Crest Drive, North Mankato, MN 56003

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

13. 
(Signature of Director or Officer listed in number 12 of the application)14. Gregory Jackson, Secretary
(Typed or printed name and capacity of person signing application)

State of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

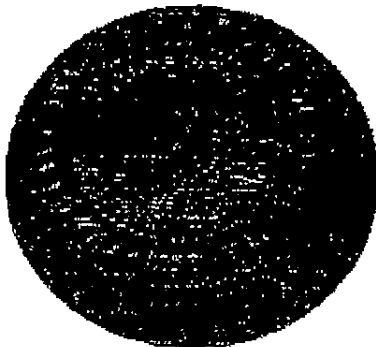
I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: Original Smith Printing, Inc.

Date Formed: 09/06/2000

Chapter Governed By: 302A

This certificate has been issued on 12/30/05.



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OFFICE OF THE SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Mary Kiffmeyer
Secretary of State.