

F07000002260

Division of Corporations

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Florida Department of State
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TALLAHASSEE, FLORIDA

FOREIGN PROFIT/NONPROFIT CORPORATION

MANOIR SPECIAL FORGING, INC.

Certificate of Status	0
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J. Shivers APR 27 2007

**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. Manolr Special Forging, 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)

3. 20-8901231

(FEI number, if applicable)

4. March 22, 2007

(Date of incorporation)

5. Perpetual

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

6. Upon qualification.

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

7. 5200 Town Center Circle, Suite 470, Boca Raton, FL 33486

(Principal office address)

5200 Town Center Circle, Suite 470, Boca Raton, FL 33486

(Current mailing address)

8. Any and 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

(City)

Florida **33324**

(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.

Connie Bryan Special Agent 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.

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

A. DIRECTORS

Chairman: R. Lynn Skillen

Address: 5200 Town Center Circle, Suite 470
Boca Raton, FL 33486

Vice Chairman: _____

Address: _____

Director: Clarence E. Terry

Address: 5200 Town Center Circle, Suite 470
Boca Raton, FL 33486

Director: Thierry Chazot

Address: 39, route des Forges, BP 82138 Bologne
52095 Chaumont Cedex 9 FRANCE

B. OFFICERS

President: Douglas C. Werking

Address: 5200 Town Center Circle, Suite 470
Boca Raton, FL 33486

Vice President: R. Lynn Skillen

Address: 5200 Town Center Circle, Suite 470
Boca Raton, FL 33486

Secretary: Douglas C. Werking

Address: 5200 Town Center Circle, Suite 470, Boca Raton, FL 33486

Treasurer: Douglas C. Werking

Address: 5200 Town Center Circle, Suite 470, Boca Raton, FL 33486

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. Douglas C. Werking, President

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

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Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MANOIR SPECIAL FORGING, 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 TWENTY-FIFTH DAY OF APRIL, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

4321905 8300
070478456



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 5624482

DATE: 04-25-07