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(Requestor's Name)	
(Address)	_
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
Certified Copies Certificates of Status	_
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Special Instructions to Filing Officer:	١
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Office Use Only

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Optima Graphics, Inc. 1725 Roe Crest Drive North Mankato, MN 56003 507-625-2828

November 23, 2009

Florida Department of State New Filing Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: Request for Registration of Foreign Corporation

Dear Sir or Madam:

Enclosed for filing with your office is an originally executed Application by Foreign Corporation for Authorization in Florida, along with our check in the amount of \$70 for your filing fee. Also enclosed is a self-addressed, stamped envelope for your convenience in returning the filed Foreign Qualification.

If you have any questions or need additional information, please do not hesitate to contact me at (507) 386-3274.

Sincerely,

Optima Graphics, Inc.

Robin Evans enclosure(s):

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Optima Graphics, Inc.
Name of corporation - must include suffix
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing"and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Robin Evans
Name of Person
Optima Graphics, Inc.
Firm/Company
1725 Roc Crest Drive
Address
North Mankato, MN 56003
City/State and Zip code
rmevans@taylorcorp.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Robin Evans at (
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building Clother Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & \$87.50 Filing Fee, Certificate of Status Certified Cop Certificate of Status & Certified 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. Optima Graphics	s, Inc.		
	orporation; must include "INCORPORATE orp.," "Inc.," "Co," or "Corp.")	ED.	," "COMPANY," "CORPORATION,"
Minnesota Optin	na Graphics, Inc.		
(If name unavaila	able in Florida, enter alternate corporate na	rne	adopted for the purpose of transacting business in Florida)
2. Minnesota		3.	26-0876505
	under the law of which it is incorporated)		(FEI number, if applicable)
4. 08/07/2007		5.	Perpetual
	of incorporation)	•	(Duration: Year corp. will cease to exist or "perpetual")
6	(Date first transacted busine	ec i	in Florida, if prior to registration)
			502, F.S., to determine penalty liability)
7 1725 Roe Crest D	Prive, North Mankato, MN 56003		SET P
,,	(Principal office	ado	Iress)
1725 Roe Crest I	Drive, PO Box 3728, North Mankato, MN	560	993 第
	(Current mailing	ado	lress)
8. Custom printing (Purpose(s		or c	ountry to be carried out in state of Florida)
9. Name and stree	et address of Florida registered agent: (. 9)	O. Box NOT acceptable)
Name:	C T Corporation System		***************************************
Office Address:	1200 South Pine Island Road		
	Plantation,		, Florida 33324
	(City)		(Zip code)
Having been nam designated in this further agree to c	application, I hereby accept the appo comply with the provisions of all statut with and accept the obligations of m	int es	
Ву:	C T Corporation System	n	e Nelson Assistant Socratory
	(Registered agent's signat	ure	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. DIRI	ECTORS		
Chairman	: Glen Taylor		
Address:	1725 Roe Crest Drive, North Mankato, MN 56003		
Vice Cha	irman: Jean Taylor		
Address:	1725 Roe Crest Drive, North Mankato, MN 56003		
Director:	Larry Taylor		
Address:	1725 Roe Crest Drive, North Mankato, MN 56003		
Director:			
	· · · · · · · · · · · · · · · · · · ·		
B. OFF	ICERS	O.9 DE	code
President	James Hoffman	至	
Address:	1725 Roc Crest Drive, North Mankato, MN 56003	1335E	
Vice Pres	ident: Suzanne Spellacy	70	<u></u> ယ ပာ
Address:	1725 Roe Crest Drive, North Mankato, MN 56003	7	
Secretary	Gregory W. Jackson		
Address:	1725 Roe Crest Drive, North Mankato, MN 56003		
Treasurer	Thomas A. Johnson		
Address:	1725 Roe Crest Drive, North Mankato, MN 56003		
	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. <u>Gre</u> g	gory W. Jackson - Secretary		
_	(Typed or printed name and capacity of person signing application)		

State of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

I, Mark Ritchie, 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: Optima Graphics, Inc.

Date Formed: 08/07/2007

Chapter Governed By: 302A

This certificate has been issued on 11/18/09.

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SECRETARISEE, FLORIDA



Mark Ritchie
Secretary of State.