Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000253055 3)))



H100002530553ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number (850) 617 6381

From:

I Name : HOGAN & HARTSON, L.L.P.

Account Number : 120040000129 Phone : (305)459-6500 Fax Number : (305)459-6550

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: carlos.deupi@hoganlovells.com

FOREIGN PROFIT/NONPROFIT CORPORATION SURVITEC SURVIVAL PRODUCTS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

002837.000001

Electronic Filing Monu

Corporate Filing Menu

Help

MRS11/23

https://efile.sunbiz.org/scripts/efilcovr.exe

11/22/2010

(H10000253055)

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

IN COMPLIANCE WITH SECTION 60°, 1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1	SURVITEC SURV	IVA	AL PRODUCTS, INC.			
(Timer name of "Inc.," *Co.," *C	corporation; must include "INCORPORAT" "orp," "Inc," "Co," or "Corp,")	ED,	" "COMPANY," "CORPORATION,"	_		
(If name unavai	lable in Florida, unter alternate corporate na	me	adopted for the purpose of transacting business in Florida)		
2. Delaware		3.	37-1614628			
(State or country	under the law of which it is incorporated)	•	(FEI number, if applicable)	_		
4. November	19, 2010	5.	Perpetual	_		
(Date	c of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")			
6. Upon qualifi	cation in the State of Florida			_		
			Florida, if prior to registration) 02, F.S., to determine penalty liability)			
_ 5333 Link			• • •			
7. 0323 Tiğil <u>w</u> i	ay Avenue, Jacksonville, Florida	-		-		
5323 Highwa	sy Avenue, Jacksonville, Florida					
0020 11191111	(Corrent mailing)		. , , , , , , , , , , , , , , , , , , ,	-		
	_		, mmg			
	activity permitted under the laws			<u>n</u> ;	5	
(Purpose(s	of corporation authorized in home state o	T CO	untry to be carried out in state of Florida)	ာ ကျောင်း	8	
9. Name and <u>stree</u>	nt address of Florida registered agent: (P.O	Box NOT acceptable)		10 NOV 2	्र _{वि} वस्त्रकार सार्यक्रम
Name:	CT Corporation System			2	?	is entitled
Office Address:	1200 South Pine Island Road			0F S T	AHII: 3	
	Plantation		, Florida 33324	TATE	သ	
	(City)		(Zip code)	1.,		
10. Revistered as	gent's acceptance;					
Having been nam	ed as registered agent and to accept se.		e of process for the above stated corporation at the			
designated in this	upplication. I hereby accept the appoin	rim	ent as registered agent and agree to act in this capa	city.	,	

H 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.

Madonna Cuddihy
Special Assistant Secretary

(Registered agent's signature)

11. Attached is a certificate of existence duty authenticated, not more than 40 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.

(H1.0000253055)

	id business addresses of officers and/or directors;	10 NOV 22 AM 11:31
A. DIRECT	ORS	SECRETARY OF STATE
Thairmail) ,	,,	TALLAHASSEE FLORIDA
Vddress:		
rector:	DOUGLAS J. BAXTER, Director	
Nddress:	5323 Highway Avenue, Jacksonville, FL	32254
	DAVID I MILIANI Discher	
Pirector.	DAVID J. WILMAN, Director	
Address:	5323 Highway Avenue, Jacksonville, FL 3	2254
Sirector:	BRIAN M. STRINGER, Director	
Address	5323 Highway Avenue, Jacksonville, FL	32254
s. Officer		
resident:	DOUGLAS J. BAXTER	
iddress:	5323 Highway Avenue, Jacksonville, FL 3	2254
ree President		
ddress	5323 Highway Avenue, Jacksonville, FL 3	2254
egretary	DAVID J. WILMAN	
ddress:	5323 Highway Avenue, Jacksonville, FL 32	
rensurer:	DAVID J. WILMAN	
ddress:	5323 Highway Avenue, Jacksonville, FL 32	
OTE: It'nec	essary, you may attach an addendum to the applicat	ion listing additional officers and/or directors.
)	Cul. 0	_
** =========	(Signature of Director or Officer listed in ne	imber 12 of the application)
4	David J. Wilman, Treasurer	,

(H10000253055)

(HL0000253055)

Delaware

The First State

ON THE STATE OF TH I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SURVITEC SURVIVAL PRODUCTS, 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-SECOND DAY OF NOVEMBER, A.D. 2010.

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

4901024

101111090

You may verify this certificate online at corp.delaware.qov/authver.shtml

(HL0000253055)

Jeffrey W. Bullock, Secretary (TION: 8370760

DATE: 11-22-10