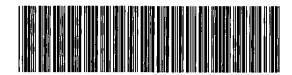
# F1200003538

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:  CONDECTED LINE # 1 (NAME OF CORP.) TO MATCH INDIANA CENTIFICATE.							

Office Use Only



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1 08/28/12

### **COVER LETTER**

New Filing Section Division of Corporations
SUBJECT: Samtec, 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:
Sarah Teegarden
Name of Person
Samtec, Inc.
Firm/Company
520 Park East Blvd.
Address
New Albany, IN 47150
City/State and Zip code
sarah.teegarden@samtec.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Sarah Teegarden at (812 ) 944-6733
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center 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 & Certificate of Status Certified Copy  \$78.75 Filing Fee & 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.

	corporation; must include "INCORPORATI Corp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"	
(If name unavail	able in Florida, enter alternate corporate na	me	adopted for the purpose of transacting business in Flo	rida)
Indiana		3.	35-1399589	
	under the law of which it is incorporated)		(FEI number, if applicable)	
10/10/1975		5.	Perpetual	
	of incorporation)		(Duration: Year corp. will cease to exist or "perpetu	ial")
10/1/2012			·	
	•		n Florida, if prior to registration) 602, F.S., to determine penalty liability)	
520 Park E	ast Blvd., New Albany, IN 4	71	50	
*	(Principal office			
same				
	(Current mailing	add	ress)	
	esentative working from hon		office selling electronic interconne	cts
` ,	,			<u>ت</u> س
. Name and stree	et address of Florida registered agent: (	P.C	). Box NOT acceptable)	-
Name:	Corporation Service Comp	ar	<u>ny '</u>	Ÿ,
Office Address:	1201 Hays Street	ı`	in the second se	•
	Tallahassee		, Florida 32301	63
	(City)		(Zip code)	: <u>1</u> 17
0 Registered a	gent's accentance:		- <del>C</del> o	,

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.

Karin L. Dunn, Assistant VP

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: Sam M. Shine Address: 520 Park East Blvd. New Albany, IN 47150 Vice Chairman: \_\_\_\_\_ Director: John B. Shine Address: 520 Park East Blvd. New Albany, IN 47150 New Albany, IN 47150 Director: Betty S. Shine Address: 520 Park East Blvd. New Albany, IN 47150 **B. OFFICERS** President: John B. Shine Address: 520 Park East Blvd. New Albany, IN 47150 Vice President: Secretary: Betty S. Shine Address: 520 Park East Blvd., New Albany, IN 47150 Treasurer: \_\_\_\_\_ Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. 14. John B. Shine, President

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

## STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

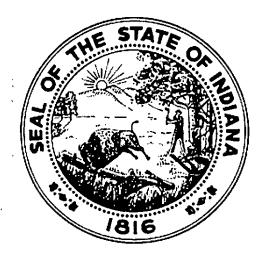
1, Connic Lawson, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

#### SAMTEC INC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on October 10, 1975, and was in existence or authorized to transact business in the State of Indiana on August 20, 2012.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Twentieth Day of August, 2012.

Corrie Zawson

Connie Lawson, Secretary of State

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TALLANASSEE, FLORIDA