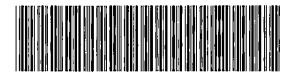
HB00005193

(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:

Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 482826 7667544

AUTHORIZATION :

COST LIMIT : \$ 70.00

ORDER DATE: November 13, 2018

ORDER TIME : 9:16 AM

ORDER NO. : 482826-010

CUSTOMER NO: 7667544

FOREIGN FILINGS

NAME: SAFRAN TEST CELLS, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

COVER LETTER

TO:	Registration Se Division of Cor								
CIIDI	Safran Te	st Cells, Inc.							
SUBJ	EC1	Name	of corporatio	n -	must include suffix				-
Dear S	Sir or Madam:								
"Certi		e," or "Certifica	te of Good Sta	ınd	uthorization to Transacing" and check are subs in Florida.				
Please	return all corresp	ondence concer	ning this matte	er t	o the following:				
Debora	ah S. Pettie								
			Name o	f Po	erson		•		-
Safran	USA, Inc.							25	
-			Firm/Co	mp	any			ar.	!
2201 V	V. Royal Lane, Sui	te 150					•	2	
	· · · · · · · · · · · · · · · · · · ·		Add	res	S		•	=	- }
Irving,	TX 75063						<u>.</u> .	τJ	1, 1
			City/State	ano	l Zip code			Ċ,	
debora	th.pettie@safrangro	oup.com							
		E-mail addre	ss: (to be used	fo	r future annual report i	notification	n)		-
For fu	rther information	concerning this	matter, plcasc	ca	11:				
Deborah Pettie 469		469 at (941-8215					
	Name of Perso	n	Area Co	de	Daytime Telep	hone Num	ber	-	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314					
Enclos	sed is a check for	the following ar	nount:						
57 (0.00 Filing Fee	S78.75 Fili Certificate			\$78.75 Filing Fee & Certified Copy			of Status	s &

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.

(If name unavail	able in Florida, enter alternate corporate name ado	pted for the purpose of transac	ting business in Florid	da)		
MN 2	3					
(State or countr 07/03/2003	y under the law of which it is incorporated) 5.	(FEI number, if applicable)				
(Date	of incorporation)	(Date of duration, if oth	of duration, if other than perpetual)			
)	(Date first transacted business in FI (SEE SECTIONS 607.1501 & 607.1502		pility)			
10255 NW	116th Way #7, Medley, FL 33178.		<u> </u>			
2201 W. Royal I	(Principal cane, Suite 150, Irving, TX 75063	office address)				
	(Current mailing a	ddress, if different)	7 70	_		
. Name and stree	et address of Florida registered agent: (P.O. I	Box <u>NOT</u> acceptable)	NEW ROY IN	1		
Name: Office Address:	1201 Hays Street	_		けて		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Tallahassee	 32301 . Florida		•		
	(City)	(Zip code)	, 🕬			
Name: Office Address:	1201 Hays Street Tallahassee	Florida	•			

10. 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.

(Registered agent's signature)

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

A. DIRE	CCTORS JEAN-CHRISTOPHE DALLA TOFFOLA								
	639 CAMPUS DRIVE								
Address:	NEW BRIGHTON, MN 55112								
Vice Chai	man:								
Address:									
Director:	YVES PRETE								
Address:	639 CAMPUS DRIVE								
,	NEW BRIGHTON, MN 55112	_							
Director:	DIEGO DE VIARIS								
	639 CAMPUS DRIVE								
	NEW BRIGHTON, MN 55112								
Address:	Michael MICHELE	3							
1 ratio Contra	NEW BRIGHTON, MN 55112	:							
Secretary:	MARK G. MELNICK	: •	<i>e</i> 6						
Address:	2201 W. ROYAL LANE. SUITE 150, IRVING. TX 75063								
Treasurer:	JEFF LEE								
Address:	639 CAMPUS DRIVE, NEW BRIGHTON, MN 55112								
NOTE:	If necessary, you may attach an addendum to the application listing additional office Signature of Director or Officer	rs and/o	director	rs.					
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 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. MARK G. MELNICK, VICE PRESIDENT AND SECRETARY									

Office of the Minnesota Secretary of State **Certificate of Good Standing**

I. Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name:

Safran Test Cells, Inc.

Date Filed:

07/03/2003

File Number:

557268-2

Minnesota Statutes, Chapter:

302A

Home Jurisdiction:

Minnesota

This certificate has been issued on:

11/02/2018

Steve Pimm

Steve Simon

Secretary of State State of Minnesota