F95000002047

Document Number Only

C T CORPORATION SYSTEM
Requestor's Name
1311 Executive Center Drive, Ste. 200
Address
Tallahassee, FL. 32301 (904) 656-8298
City State Zip Phone

100001486831
-04/27/95--01059--007
*****70.00 *****70.00

CORPORATION(S) NAME

Heritage IWKs International Corporation

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(X) Profit
( ) NonProfit
( ) Limited Liability Company
( ) Amendment
( ) Merger

(X) Foreign
( ) Dissolution/Withdrawal
( ) Mark

( ) Limited Partnership
( ) Reinstatement
( ) Annual Report
( ) Reservation
( ) Other
( ) Change of R.A.
( ) Fictitious Name

( ) Certified Copy
( ) Photo Copies
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( ) Mail Out
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3:00
4/27/95

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CR2E031 (1-89)

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWI SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS I STATE OF FLORIDA:

1. Heritage Inks International Corporation
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Delaware
(State or country under the law of which it is incorporated)

3. 22-3366029
(FEI number, if applicable)

4. March 15, 1995
(Date of Incorporation)

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

6. May 1, 1995
(Date first transacted business in Florida. (See sections 607.1501, 607.1502 and 817.156, F.S.))

7. 100 Pershing Avenue, Edison, NJ 08837
(Current mailing address)

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TALLAHASSEE FLORIDA

8. See Attached
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent:

Name: C T CORPORATION SYSTEM

Office Address: c/o C T Corporation System, 1200 South Pine Island Road

Plantation , Florida, 33324
(Zip Code)

10. Registered agent 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.

C T CORPORATION SYSTEM

X Ann Marie Cummins
(Registered agent's signature) (Officer)

ANN MARIE CUMMINS
ASSISTANT SECRETARY
(Type Name and Title of Officer)

(FLA. - 2189 - 11/16/94)

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 addresses of officers and/or directors:

A. DIRECTORS

Chairman: David P. Kollock

Address: c/o Heritage Inks International Corporation
100 Pershing Avenue, Edison, NJ 08837

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: James Coleman

Address: c/o Heritage Inks International Corporation
100 Pershing Avenue, Edison, NJ 08837

Vice President: P. Randolph Gray

Address: c/o Heritage Inks International Corporation
100 Pershing Avenue, Edison, NJ 08837

Secretary: P. Randolph Gray

Address: c/o Heritage Inks International Corporation
100 Pershing Avenue, Edison, NJ 08837

Treasurer: P. Randolph Gray

Address: c/o Heritage Inks International Corporation

100 Pershing Avenue, Edison, NJ 08837

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. David P. Kollock, Chairman
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

(FLA. 2189)

TO ENGAGE IN THE BUSINESS OF MANUFACTURING, MARKETING, AND DISTRIBUTING PRINTED INK FOR NEWSPAPERS, CORREGATED SUBSTRATES, AND PROVIDING RELATED SERVICES AND SUPPORT TO CUSTOMERS AND ANY PERMISSIBLE CORPORATE PURPOSES UNDER THE GENERAL CORPORATION LAW.

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TALLAHASSEE, FLORIDA

State of Delaware

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HERITAGE INKS INTERNATIONAL CORPORATION" 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-FOURTH DAY OF APRIL, A.D. 1995.

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Edward J. Freel, Secretary of State

2486598 8300

950090170

AUTHENTICATION: 7483241

DATE: 04-24-95

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
96 DEC 31 AM 9:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F95000002047

1. Corporation Name
HERITAGE INKS INTERNATIONAL CORPORATION

Principal Place of Business	Mailing Address
100 PERSHING AVE. EDISON NJ 08837	100 PERSHING AVE. EDISON NJ 08837

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable	3. New Mailing Office Address, if Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: 04/27/1995

5. FEI Number: 22-3380929 (Applied For / Not Applicable)

6. CERTIFICATE OF STATUS DESIRED ☐

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
DC	KOLLOCK, DAVID P	100 PERSHING AVE.	EDISON NJ 08837
COO	Saeks, Sumner M	100 PERSHING AVE.	EDISON NJ 08837
CEO	Adelman Lawrence M	100 PERSHING AVE.	EDISON NJ 08837
VP	Schuler, Eric	100 PERSHING AVE.	EDISON, NJ 08837

REINSTATEMENT 96

8. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

9. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc.
City / State / Zip Code: FL

300002046263--3
-01/06/97--01004--016
**375.00
**375.00

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Connie Bryan
Connie Bryan REGISTERED AGENT MUST SIGN Spec Asst Secy
Date: 12-31-96

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☐ (See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: By: J.E. Schuler Eric Schuler 12-30-96 908/225-1800
SIGNATURE AND TYPED OR PRINTED NAME OF BUSINESS OFFICER OR DIRECTOR Date