

F95000004209

TO: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: Tiger Paws Floor Safety Systems of Florida, 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", 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:

Ralph Lutz
(Name of Person)

Tiger Paws Floor Safety Systems of Florida, Inc.
(Firm/Company)

13523 Decatur Circle
(Address)

Omaha, NE 68154
(City/State/Zip)

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Should you need to call someone concerning this matter, please call:

Ralph Lutz at (402) 496-2040
(Name of Person) (Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Sec.
Division of Corporations
409 E. Gaines St
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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. Tiger Paws Floor Safety Systems of Florida, Inc.
(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. Nebraska
(State or country under the law of which it is incorporated)
3. 47-0791472
(FBI number, if applicable)
4. 7/11/95
(Date of Incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. 9/1/95
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))

7. 13523 Decatur Circle
Omaha, NE 68154
(Current mailing address)

8. . . . to transact any and all lawful business . . .
(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: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: Thomas Edmonds

Office Address: 245 Courtney Ave.

Orange City, Florida, 32763
(Zip Code)

10. Registered agent's 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.

Thomas B. Edmonds Thomas Edmonds
(Registered agent's signature)

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: (Street address ONLY- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: /Solo Director -- Ralph Lutz

Address: 13523 Decatur Circle, Omaha, NE 68154

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

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FEDERAL RESERVE BANK

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

Solo Officer as

President: /Secretary/Treasurer -- Ralph Lutz

Address: 13523 Decatur Circle, Omaha, NE 68154

Vice President:

Address:

Secretary:

Address:

Treasurer:

Address:

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.

Ralph Lutz

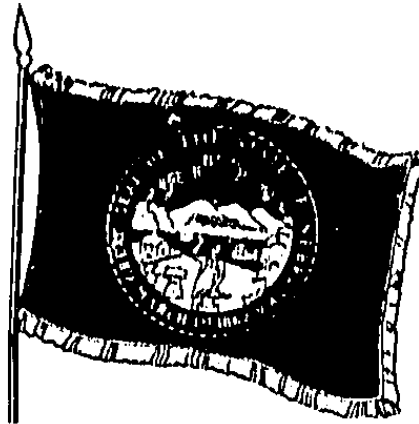
(Typed or printed name and capacity of person signing application)

STATE OF

NEBRASKA

United States of America,
State of Nebraska

} ss.



Department of State
Lincoln, Nebraska

I, Scott Moore, Secretary of State of the State of Nebraska do hereby
certify;

TIGER PAWS FLOOR SAFETY SYSTEMS OF FLORIDA, INC.

with registered office located in OMAHA, Nebraska, filed
Articles of Incorporation in this office on July 11, 1995.

I further certify that said corporation is in good standing as of this date.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED

In Testimony Whereof,

I have hereunto set my hand and
affixed the Great Seal of the State
of Nebraska on August 2
in the year of our Lord, one thousand
nine hundred and ninety-five.



Scott Moore

SECRETARY OF STATE