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TRANSMITTAL LETTER

TO: QUALIFICATION/TAX LIEN SECTION
DIVISION OF CORPORATIONS

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9-26

SUBJECT: C & G CONTAINERS, 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:

GALE BREAU
(Name of Person)
C & G Containers, Inc.
(Firm/Company)
P.O. Box 2003
(Address)
Lafayette, LA 70502
(City, State and Zip Code)

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

Gale Breau at (318) 237-7123
(Name of Person) Area Code & Daytime Telephone Number

COURIER ADDRESS:

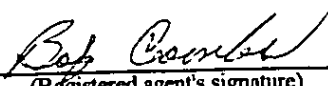
Qualification/Tax Lien Sec.
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Sec.
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. C & G Containers, 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. Louisiana
(State or country under the law of which it is incorporated)
3. 72-1137742
(FEI number, if applicable)
4. February 6, 1989
(Date of Incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. 9/25/95
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. P.O. Box 2003 Lafayette, LA 70502
152 Easy Street Lafayette, LA 70506
(Current mailing address)
8. Wholesale Sales of Products
(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: BoB Combs
Office Address: 314 SW 122nd Street
Gainesville, Florida, 32607
(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.

(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.

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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: Gale Breaux

Address: 152 Easy Street Lafayette, LA 70506

Vice Chairman: _____

Address: _____

Director: Gale Breaux

Address: 152 Easy Street Lafayette, LA 70506

Director: Gale Breaux

Address: 152 Easy Street Lafayette, LA 70506

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

President: Gale Breaux

Address: 152 Easy Street- Lafayette, LA 70506

Vice President: Gale Breaux

Address: 152 Easy Street Lafayette, LA 70506

Secretary: Gale Breaux

Address: 152 Easy Street Lafayette, LA 70506

Treasurer: Gale Breaux

Address: 152 Easy Street Lafayette, LA 70506

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

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

14. Gale Breaux
(Typed or printed name and capacity of person signing application)

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UNITED STATES OF AMERICA

State of Louisiana

Box McKeithen
SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that
C & G CONTAINERS, INC.

A Louisiana corporation domiciled at Lafayette,

Filed charter and qualified to do business in this State on
February 6, 1989,

I further certify that the records of this Office indicate
the corporation has paid all fees due the Secretary of
State, and so far as the Office of the Secretary of State is
concerned is in good standing and is authorized to do
business in this State.

I further certify that this Certificate is not intended to
reflect the financial condition of this corporation since
this information is not available from the records of this
Office.

*In testimony whereof, I have hereunto set
my hand and caused the Seal of my Office
to be affixed at the City of Baton Rouge on,*

August 30, 1995

Box McKeithen

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Secretary of State



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