•			
	1100		
an a	Uncument Number Only		
	1500	000	245
	CT CORFORATION SYSTE	H	
	Nachistor's Hame GGU East Jefferson S	treet	
	Address Tollolicesee, FL 323 Chy State Zhi		998991669070
	· · · · · · · · · · · · · · · · · · ·	Flicine TION(8) NAME	000000163656770 -12/22/9501068037 *****70.00 ******70.00
			·····
		· · · · · · · · · · · · · · · · · · ·	tt 12 22 g
	Lak	Consumer Product	S Jac BER
	Xproll		
	() NonProlit	() Amendment	() Mercine
	HJ orelyn	() Dissolution/W	Kindrawal () Marks m
	() Limited Pertnership () Neinstetement	() Annuel Report	<u> </u>
		() Neservellon	() Change of A
	() Certilled Copy	() Photo Copies	() 005
	Call When Heady	() Cell II Problem	
	Welk In () Mell Oul		() After 4:30 Pick Up
	Valia Avallability		
	Doctminiti Examiner	12/22/95 3:00	PLEASE RETURN EXTRA COP File Stanfed
	Vizialai Vaimai	ري . د	
	Acknowledgment		
	W.P. Verlier		

A	VPPLICATION	BY FOREIGN	CORPORAT	TON FOR	AUTHORIZA	TION
		TRANSACT	BUSINESS I	N FLORID		

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. Lake Consumer Products, Inc.

IName 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. Nevada			, 33-03	24278
	 	 •	3	

Istate or country under the law of which it is incorporated)

(FEI number, if applicable)

95 DEC 22 PH 12: 54

VS

4. <u>12/09/88</u> (Data of Incorporation) Perpetual

(Duration: Year corp. will casse to exist or "perpetual")

- 6. Upon Qualification (Data first transacted business in Florida. (See sections 607.1501, 607.1502 and 817.156, F.S.))
- 7. 625 Forest Edge Drive

Vernon Hills, IL 60061

(Current inailing address)

8. Pharmaceutical Business

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Floride)

9. Name and street address of Florida registered agent:

Name: <u>_______BURNS</u>______Office Address: <u>______</u>10_SEAGATE_DRIVE, #9_SOUTH

NAPLES

33940 (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 groper and complete performance of my duties, and I am familiar with and accept the obligations of my position as maistered agent.

Florida,

(Registered agent's signature) (Officer)

CARY AURNS PRESIDENT (Type Name and Title of Officer) 10 SEAGATE DRIVE #9 SOUTH NAPLES, FL 33940

(FLA. - 2189 - 11/16/84)

11: Attached is a certificate of existence duly authenticated, not more than BO 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	end address	es of officers and/or directors:	
A. DIRECTO	RS		
	Chaimen:		
	Address: _		
	-		
	Vice Chain	men:	
	-		
• • •	Director: _	Gary Burns	
	Address: _	625 Forest Edge Drive	
	-	Vernon Hills, IL 60061	
	Director:		
н Х	Address:		
	-		
B. OFFICERS	i		•
	President:	Gary Burns	
	Address:	625 Forest Edge Drive	
	-	Vernon Hills, IL 60061	
	Vice Presid	ent:	
	Address:		
	_		
	Secretary:	Gary Burns	·
	Address:	625 Forest Edge Drive	<u> </u>
		Vernon Hills, IL 60061	

 $\leq 30^{-1}$

11

Treseurer: ____ Gary Burns

Address: _____625 Forest Edge Drive

Vernon Hills, IL 60061

NOTE: It necessary, you may attach an addendum to the application listing additional officers

1. 1. 1.

13.

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

14. _Gary Burns, President

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



CERTIFICATE OF CORPORATE EXISTENCE (EXCLUDING AMENDMENTS)

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to corporations organized under the laws thereof; the revocation of their corporate charters, and their right to transact and carry on their corporate business; and am the proper officer to execute this certificate.

I further certify that, at the date of this certificate, LAKE CONSUMER PRODUCTS, INC. is a corporation duly organized and existing under and by virtue of the laws of the State of Nevada, having fully complied therewith, is entitled to exercise therein all the corporate powers and functions recited in its charter or articles of incorporation, and is in good standing in this State.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, this 19th day of December, 1995

IEC 22 PH 12: 5

Secretary of State

Certification Clerk