

1201 HAYS STREET
TALLAHASSEE, FL 32301
904-222-9171
904-222-0393 FAX

800-342-8086

CS network
PRESTIGE MAIL
LEGAL & FINANCIAL SERVICES

ACCOUNT NO. : 072100000032
REFERENCE : 873499 159197A
AUTHORIZATION : *Patricia Pyatt*
COST LIMIT : \$ 122.50

ORDER DATE : March 7, 1996

ORDER TIME : 11:46 AM

500001754905

ORDER NO. : 873499

CUSTOMER NO: 159197A

CUSTOMER: Ms. Marcia Reifenhaiser
Praxair Inc.
39 Old Ridgebury Road

Danbury, CT 06810-5113

FOREIGN FILINGS

NAME: PRAXAIR DISTRIBUTION, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: LYDIA LOTT

0322
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 MAR 22 PM 1:50
RECEIVED
96 MAR 22 PM 1:27
DIVISION OF CORPORATION

**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. Praxair Distribution, 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. Delaware
(State or country under the law of which it is incorporated)
3. 06-1421-591
(FEI number, if applicable)
4. December 7, 1994
(Date of Incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. 39 Old Ridgebury Road
Danbury, Ct 06810-5113
(Current mailing address)
8. Distributor of packaged gases and related products.
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
56 MAR 22 PM 1:50

9. **Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)**

Name: The Prentice-Hall Corporation System, Inc.

Office Address: 1201 Hays Street, Suite 105

Tallahassee, Florida, 32301
(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.

The Prentice-Hall Corporation System, Inc.

By: Vicki Schreiber Asst. V.P.
(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: See attachment

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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

President: See attachment

Address: _____

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

14. Marcia A. Reifenheiser, Assistant Secretary
(Typed or printed name and capacity of person signing application)

**Directors and Officers
Praxair Distribution, Inc.**

Jose R. Rivero
Primary : 39 Old Ridgebury Road
Address : Danbury, CT 06810-5113

Patrick T. Devlin
Primary : 39 Old Ridgebury Road
Address : Danbury, CT 06810-5113

Gary J. Hoeing
Primary : 39 Old Ridgebury Road
Address : Danbury, CT 06810-5113

Jose R. Rivero
Primary : 39 Old Ridgebury Road
Address : Danbury, CT 06810-5113

Patrick T. Devlin
Primary : 39 Old Ridgebury Road
Address : Danbury, CT 06810-5113

Gary J. Hoeing
Primary : 39 Old Ridgebury Road
Address : Danbury, CT 06810-5113

Robert A. Bassett
Primary : 39 Old Ridgebury Road
Address : Danbury, CT 06810-5113

James S. Sawyer
Primary : 39 Old Ridgebury Road
Address : Danbury, CT 06810-5113

Marcia A. Reifenheiser
Primary : 39 Old Ridgebury Road
Address : Danbury, CT 06810-5113

S. Mark Seymour
Primary : 39 Old Ridgebury Road

Assistant Treasurer

State of Delaware
Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREDY CERTIFY "PRAXAIR DISTRIBUTION, INC." 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 TWENTIETH DAY OF MARCH, A.D. 1996.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 MAR 22 PM 1:50



Edward J. Freel

Edward J. Freel, Secretary of State

2459237 8300

960080369

AUTHENTICATION: 7873668

DATE: 03-20-96



F96000001484
1st

ACCOUNT NO. : 072100000032

REFERENCE : 323866 159197A

AUTHORIZATION :

Patricia Poynt

COST LIMIT : \$ 35.00

ORDER DATE : April 8, 1997

ORDER TIME : 9:33 AM

ORDER NO. : 323866-010

200002140272--0

CUSTOMER NO: 159197A

CUSTOMER: Ms. Marcia Reifenhaiser
Praxair Inc.
39 Old Ridgebury Road
Danbury, CT 06810-5113

FOREIGN FILINGS

NAME: PRAXAIR DISTRIBUTION, INC.

XX PROFIT
 NON-PROFIT

XX CORPORATE
 LIMITED PARTNERSHIP

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: WARREN WHITTAKER

FILED
97 APR 11 PM 1:10
RECEIVED
97 APR 11 AM 10:43
SECRETARY OF STATE
TALLAHASSEE FLORIDA
DIVISION OF CORPORATION

4/11
JTS
Withdrawal

**APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL
OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS
IN FLORIDA**

PRAXAIR DISTRIBUTION, INC.
(Name of Corporation)

Delaware
(Incorporated Under Laws Of)

FILED
97 APR 11 PM 1:10
SECRETARY OF STATE
TALLAHASSEE FLORIDA

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address to which the Department of State may mail a copy of any process against this corporation that may be served on the Department.

39 Old Ridgebury Road
(Mailing Address)

Danbury, CT 06810-5113
(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

Marcia A. Reifeneiser Assistant Secretary
Signature Title

Marcia A. Reifeneiser
Typed or printed name

4/1/97
Date



THE UNITED STATES
CORPORATION
COMPANY

F96000001484
1st

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COST LIMIT : \$ 35.00

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Marcia A. Reifenheiser Assistant Secretary
Signature Title

Marcia A. Reifenheiser 4/11/97
Typed or printed name Date

F96000001484

Section 215.26, Florida Statutes, states in part: "Applications for refunds as provided in this section shall be filed with the Comptroller, except as otherwise provided herein, within 3 years after the right to such refund shall have accrued else such right shall be barred." Three years is generally interpreted as meaning three years from the date of payment into the State treasury. The Comptroller has delegated the authority to accept applications for refund to the unit of State government which initially collected the money.

Pursuant to the provisions of Rule 3A-44.020, Florida Administrative Code, and Section 215.26, Florida Statutes, or Section , Florida Statutes, I hereby apply for a refund of moneys I paid into the State treasury, which are subject to refund. The following information is submitted to substantiate the claim.

Name: PRAXAIR DISTRIBUTION, INC. EIN or SS#: 06-1421591

Address: 39 OLD RIDGEBURY ROAD, STATE INCOME TAXES L2
DANBURY, CT. 06810-5113

Amount: \$165.00 Date Paid APRIL 29, 1997

Reason for claim: Corp. withdrew, no AIR required - F96000001484
SP1 5/20/97

Certified true and correct this 11 day of JUNE, 19 97

Signature M. A. Pfenhagen

* Must be completed if authority is other than Section 215.26, Florida Statutes.

<p>For Agency Use Only</p> <p>Agency recommends approval of above claim and submits the following information to substantiate the claim: Amount of recommended refund \$ <u>165.00</u></p> <p>The amount requested above was originally deposited into the State Treasury as a part of the funds deposited on State Treasurer's Receipt No. <u>92411092</u> dated <u>05-09-97</u></p>	
<p>Name of Account <u>4520213000145300000000000010000</u></p>	
<p>Statutory Authority for Collection <u>687</u></p>	
<p>It is requested that payment be made from the following account:</p>	
<p>NAME OF ACCOUNT <u>452021300014530000000022002000</u></p>	
<p>Certified true and correct this <u> </u> day of <u> </u>, 19 <u> </u></p>	
<p>Department of State, Division of Corporations</p> <p>(Agency)</p>	<p>(Authorized Signature and Title)</p>