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City State Zip	71 222-1092 Phone			
CORPORAT	rion(s) name			
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Paulsen Merg	er Corp.			
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W.P. Verifler

CR3E031 (1-90)

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION 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:

Paulsen Merger Corp.	
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPO words or abbreviations of like import in language as will clearly indicate that it is a corpo of a natural person or partnership if not so contained in the name at present.)	ORATION" or pration instead
Pennsylvania 3, 23-28495	96
Pennsylvania 3, 23-28495 (State or country under the law of which it is incorporated) (FEI number	r, if applicable)
. 6/13/96 5. perpetual	
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpo	etual")
After approval of this Application. (Lyan Quelification)	S 5
. After approval of this Application. Upon Quelification. (Date first transacted business in Florida. (See sections 607.150), 607.1502 and 817.	156, E.S.) j
880 South Second Street	22 SE 22 SE
Sunbury, PA 17801	- 6 65X
(Current mailing address)	STAN
wire rope manufacturing	20
(Purpose(s) of corporation authorized in home state or country to be carried out in the st Florida)	ate of
Name and street address of Florida registered agent:	
Name: <u>C T CORPORATION SYSTEM</u>	
Office Address: c/o C T Corporation System, 1200 South Pine Island	Road
Plantation , Florida , 33324 (Zip Code)	
. 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.

G T CORPORATION SYSTEM				
des K. Pastor				
(Registered agent's signature) (Officer)				
LISA K. PASTOR Asst Secy. (Type Name and Title of Officer)				
(Type Name and Title of Officer)				

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. N	lames	and a	addresses	of	officers	and/or	director	4:
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A.	DIRECTORS				
	Chairman:	See	Exhibit	Α	attached.

	Address:		
	Vice Chairman:		
	Address:		
			_
	Director:		<u> </u>
	Address:		5
		JUH 26	35
	Director:	96 JUN 26 PH 2: 20	300
	Address:	: 20	250
		,	
B. OFFICER	as		
	President: See Exhibit A attached.		
	Address:		
	Vice President:		
	Address:		
	Secretary:		
	Address:		

	Treasurer:						
	Address:						
and/or dire	ctors. PAULS	en merger o	CORP		ication listing a		icers
13	Byı	Hord &	Chaste-		ber 12 of the app		·····
						lication)	
14. <u>//</u> (Typed	or printed name.	HNSTON	ンチとだり person signing	application)			

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 96 JUN 26 PM 2: 20

PAULSEN MERGER CORP.

EXHIBIT A

Officers:

Predrik B. Paulsen, Jr. Chairman of the Board, President and Chief Executive Officer 880 South Second Street Sunbury, PA 17801

> James Cameron Bromley Executive Vice President and Chief Operating Officer 880 South Second Street Sunbury, PA 17801

Michael F. Catino Vice President-Engineering 880 South Second Street Sunbury, PA 17801

Richard H. Dietz Vice President-Operations 880 South Second Street Sunbury, PA 17801

Hood C. Johnston Vice President-Finance and Administration, Treasurer and Secretary 880 South Second Street Sunbury, PA 17801

Directors:

Fredrik B. Paulsen, Jr. 880 South Second Street Sunbury, PA 17801

James Cameron Bromley 880 South Second Street Sunbury, PA 17801

Hood C. Johnston 880 South Second Street Sunbury, PA 17801

Pamela B. Paulsen 880 South Second Street Sunbury, PA 17801



COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

JUNE 20, 1996

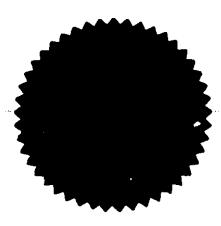
TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT.

PAULSEN MERGER CORP.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office

95 JUN 26 PM 2: 20



show, as of the date herein.

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

SWAL

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 hersin, 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 JA-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. C T Corporation System EIN or SS#: 51-0006522 Name: 3 Gateway Ctr., 16th Fl. Address: Pittsburgh PA 15222 Amount: ___\$35.00_ ____ Date Paid 10/8/96 Reason for claim: CANCELLED REQUEST. PAULSEN MERGER CORP. F96000003249 Certified true and correct this __18_ day of _ Moonmber Signature_ Must be completed if authority is other than Section 215.26, Florida Statutes. Agency recommends approved of above claim and submits the following the provider of HENDLICES IN 12/06 substantiale and claim: Amount of recommended refered 32:00 Name of Account 452021300014550000000000000000 Statutory Authority for Collection 607:0121 It is requested that payment be made from the following account: NAME OF ACCOUNT: 45202130001453000000022602800 Certified true and correct this day of Department of State: Division of Corporations

(Authorized Signature and Title)

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CT CORPORATION SYST	'EM		
Requestor's Name 660 East Jefferson	Street		
Address Tallahassee, FL 32	301 222-1092	800001972446)5
City State Zip	Phone	54.00001572446 -10/14/9601016- ******	-009 +35.00
CORPOR	ATION(S) NAME		
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M D Varling			

CR2E031 (1-89)