# To: Qualification/Tax Lien Section Division of Comparations

Division of	Corporadons	
SUBJECT:	SALYER PERFUSION, Inc.	
	(Name of corporation - must include suffix)	
Dear Sir or Madam	02/ ***	24253563 09/9801100004 **78.75 *****78.75
The enclosed "App "Certificate of Exis transact business in	lication by Foreign Corporation for Authorization to Transact Busine tence", and check are submitted to register the above referenced foreit Florida.	ss in Florida", gn corporation to
Please return all cor	rrespondence concerning this matter to the following:	
	Judith A- Keux (Name of Person)	_ W99-2930
. —	SALYER PERFUSION, Inc. (Firm/Company)	
	1817 Belt WAY (Address)	
_	ST-LOUIS, MD 63/14 (City/State/Zip)	_ ul/
Should you need to	call someone concerning this matter, please call:  Kelly at (314) 423-6511	DIVISION OF COS
(Name of		mber) O. S. A.

### **COURIER ADDRESS:**

Qualification/Tax Lien Section 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



### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

February 10, 1998

JUDITH A. KELLY SALYER PERFUSION, INC. 1817 BELT WAY ST. LOUIS, MO 63114

SUBJECT: SALYER PERFUSION, INC. Ref. Number: W9800002930

We have received your document for SALYER PERFUSION, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6958.

Lee Rivers Document Examiner

Letter Number: 998A00007535

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE V REGISTER A FORE	WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO FIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	
words or abbreviati	SALVER PERFUSION, TIME, ion; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or tions of like import in language as will clearly indicate that it is a corporation instead of a partnership if not so contained in the name at present.)	
2 MISS C	our the law of which it is incorporated)  3. 43-1759663  (FEI number, if applicable)	
(State or country ur	HOU HO WALL ON HIMMON HELD T	1
	of incorporation)  5. PERPETUAL  (Duration: Year corp. will cease to exist or "perpetual")	
(Date o	of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	
6.	UPON QUALIFICATION	
(Date first tra	ransacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	
7181	IT BELT WAY	
Sa	T. LOUIS, MO 63114  (Current mailing address)	מוע
	(Current mailing address)	SEC
Dearco	7	FT F
8. Pumose(s)	on Auto TRAS FUSION of corporation authorized in home state or country to be carried out in state of Florida)	7F
(I mposeco)	of corporation authorized in home state or country to be carried out in state of Florida)  t address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	ā
	2 9 Sim	
Name:	KOB SNOW	
Office Address:	6614 Saltaire Terr	
_	Margate, FL 33063, Florida, 33063	
•	(Zip code)	
10. Registered age	ent's acceptance:	
in this application, I comply with the prove	as registered agent and to accept service of process for the above stated corporation at the place design hereby accept the appointment as registered agent and agree to act in this capacity. I further agree wisions of all statutes relative to the proper and complete performance of my duties, and I am familia actions of my position as registered agent.	to
	(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

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

of which it is incorporated.

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)	
Chairman:	·
Address:	
Vice Chairman:	
Address:	•
Director:	
Address:	$\rightarrow$
	98 V <sub>S</sub>
Director:	FI SEE
Address:	
D. OFFICEDS (Street address only B.O. Day NOT assentable)	<u> </u>
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	STATE BRATIC 10: 2
President: NANCEE L. Salyer	<u> </u>
Address: #2 ALMONT ACRES	
ST. LOUIS, MO 63124	
Vice President: Scott WALTER	
Address: #2 ALMONT ACRES	
ST. LOUIS, UD 63124	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: TO	
NOTE: If necessary, you may attach an addendum to the application listing additional officers	s and/or directors.
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of	the application)
14. NANCEE SAWER, PRESIDENT	
(Typed or printed name and capacity of person signing applied	cation)

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## Rebecca McDowell Cook Secretary of State

CORPORATION DIVISION

CERTIFICATE OF CORPORATE GOOD STANDING

I, REBECCA McDOWELL COOK, SECRETARY OF STATE OF THE STATE OF MISSOURI, DO HEREBY CERTIFY THAT THE RECORDS IN MY OFFICE AND IN MY CARE AND CUSTODY REVEAL THAT SALYER PERFUSION, INC.

WAS INCORPORATED UNDER THE LAWS OF THIS STATE ON THE 26TH
DAY OF SEPTEMBER, 1996, AND IS IN GOOD STANDING, HAVING FULLY

COMPLIED WITH ALL REQUIREMENTS OF THIS OFFICE

IN TESTIMONY WHEREOF, I HAVE SET MY HAND AND IMPRINTED THE GREAT SEAL OF THE STATE OF MISSOURI, ON THIS, THE 22ND DAY OF JANUARY, 1998.

Secretary of State

