

F98000001011

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: Braker AXS, 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:

Jennifer Ferry - Accounts Payable
(Name of Person)
Braker AXS, Inc. 100002347061-9
(Firm/Company) -11/14/97-01017-001
6300 Enterprise Lane
(Address) *****70.00 *****70.00
Madison, WI 53719-1173 W97-25765
(City/State/Zip)

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

Jennifer Ferry (accounts Payable) at (608) 276-3003
(Name of Person) (Area Code & Daytime Telephone Number)

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

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

November 14, 1997

JENNIFER FERRY - ACCOUNTS PAYABLE
BRUKER AXS, INC.
6300 ENTERPRISE LANE
MADISON, WI 53719-117

SUBJECT: BRUKER AXS, INC.
Ref. Number: W97000025765

*Fax to Ted
for
Signature*

We have received your document for BRUKER AXS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Done A brief description of the entity's nature of business must be included in the document.

Get Signature The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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: 897A00054777

Another Certificate

**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. Bruker AXS, 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. MA 3. 39-1908020
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 9/19/97 5. 10/1/97
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 10-1-97
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 6300 Enterprise Lane
Madison, WI 53719-1173
(Current mailing address)

8. Sales and Service of Analytical X-ray Instrumentation
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

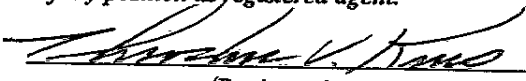
9. Name and street address of Florida registered agent: (P.O. Box or M- Drop Box NOT acceptable)

Name: Ted Krus

~~Office~~ Address: 1251 Meadowbrook Rd, NE
Palm Bay, Florida, 32909
(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.

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

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A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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

President: Martin Haase

Address: 6300 Enterprise Ave

MADISON WI 53719-1173

Vice President: Mark R Depp

Address: 4534 Aztec Trail

MADISON WI 53711

Secretary: Richard Stein

Address: 101 Federal St

Boston, MA 02110

Treasurer: Robert C. Carney

Address: 2917 Cimarron Trail

MADISON WI 53719

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

13. X Robert C. Carney
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. ROBERT C. CARNEY
(Typed or printed name and capacity of person signing application)

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**Bruker AXS, Inc.
List of Officers**

Name & Address	Social Security#	Title
Martin Haase 6300 Enterprise Lane Madison WI 53719-1173 Phone: 608-276-3000	393-13-9481	President
Robert C Carney 2917 Cimarron Trail Madison WI 53719 Phone: 608-271-2544	563-11-8219	Treasurer
Mark R Depp 4534 Aztec Trail Madison WI 53711 Phone: 608-273-8846	394-58-5339	VP Eng & Dev
Kline M Wilkins 87 Winslow Road Newton MA 02168 Phone: 617-630-1193	228-70-0751	VP Operations
Richard M Stein 101 Federal Street Boston MA 02110 Phone: 617-951-6600	020-42-4222	Secretary
Frank H Laukien, PH.D. 12 Smith Hill Road Lincoln MA 01773 Phone: 617-259-1411		CEO

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Bruker Analytical X-ray Systems, Inc.

6300 Enterprise Lane
Madison, WI 53719-1173

Tel: 608/276-3000
Fax: 608/276-3015 (General)
Fax: 608/276-3006 (Sales/Marketing/Accounting)

Web site: <http://www.bruker.axs.com>



The Commonwealth of Massachusetts

Secretary of the Commonwealth

State House, Boston, Massachusetts 02133

William Francis Galvin
Secretary of the
Commonwealth

January 14, 1998

TO WHOM IT MAY CONCERN:

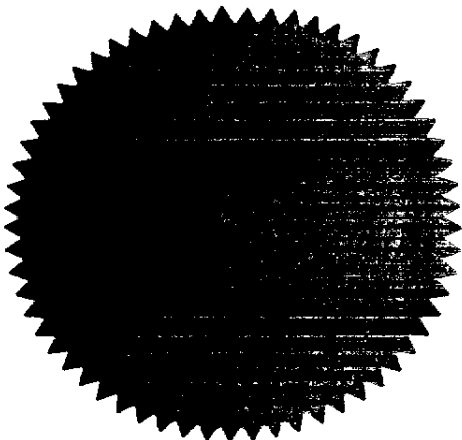
I hereby certify that according to the records of this office

Bruker AXS, Inc.

is a domestic corporation organized on **September 19, 1997**, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156B section 101 for said corporations dissolutions; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.

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In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

William Francis Galvin

Secretary of the Commonwealth

* This is not a tax clearance. Certificates certifying that all taxes due and payable by the corporation have been paid or provided for are issued by the Department of Revenue.

** MGL Chapter 156B Section 83A provides that certain consolidations and mergers may be filed with the division within thirty days after the effective date of the merger or consolidation.