

CT CORPORATION SYSTEM				,
660 EAST JEFFERSON ST	REET!			
Requestor's Name TALLAHASSEE, FL 3230	01			
Address	222–1092			
City State Zip	Phone		00002521 -05/13/981	01035026
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CORPORAT	ON(S) NAME			
Conforma Clas	1 INC			
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() Limited Liability Co.	· · · · · · · · · · · · · · · · · · ·	<u> </u>		<u>්රීත</u> ව
() Foreign	() Dissolution	on/Withdrawal	() Mark	
() Limited Partnership	() Annual F	Report	() Other	CD già
() Reinstatement	() Name.Re () Ficti	egistration tious Name	() Change of l	R.A.
() Certified Copy	() Photo Co		() CUS	5
() Call When Ready	() Call if Pro	oblem	() After 4:30	<u>63 —</u>
Walk in	() Will Wait		Pick Up	
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Name Avallability	-:		Thanks,	
· I	MAY 1	3 1998	Jeff	•
Document Examiner	-	. •		
Updater			•	,
Verifier			•	
Acknowledgment	2	æ		
W.P. Verifler				•

CR2E031 (1-89)

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:

1.	Co	onforma Clad, Inc.		
	(Name of corporation: abbreviations of like in		RPORATED", "COMPANY", "(y indicate that it is a corporation sent.)	
2.	Delaware	e r the law of which it is incorpo	3.	35-1979907 (FEI number, if applicable)
4.			Perpetual (Duration: Year corp. will c	ease to exist or nemetual")
6.			ons 607.1501, 607.1502, and 8	
7.	504 5 1	k East Blvd.	ons 607.1501, 607.1502, and 6	PH IZ: C
	New Alba	any, IN 47150		36 11E 11DA
		(Current mailing address)		
8.	(Purpose(s) of corpora Florida)	factures custom coation authorized in home state	or country to be carried out in	the state of
J.		C T CORPORATION SYSTE	_	
			1200 South Pine Island Road	· -
		Plantation Flor	ida, <u>33324</u> (Zip Code)	
H de fu	esignated in this applicant earther agree to comply w	registered agent and to accept ation. I hereby accept the appoint with the provisions of all statut and accept the obligation of my	ointment as registered agent a les relative to the proper and co position as registered agent.	ve stated corporation at the place nd agree to act in this capacity. I omplete performance of my duties,
		n	DRATION SYSTEM	_
	- -	ONNIE	nt's signature) (Officer) BRYAN SSISTANT SECRETARY	
	FL - 2189 - 9/23/97) — Satom		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. Names and addresses of officers and/or directors:

A.	DIRECTORS	∴			
	Chairman:	Benjamin Jacobson 2			
	Address:	595 Madison Avenue			
		New York, New York 10022			
	Vice Chairr	man: James Wilson			
	Address:	595 Madison Avenue			
	-	New York, New York 10022			
	Director:	Timothy Fisher	SECRI	98 HAY	EMEL!
	Address: _	1800 Grant Building	HAS.	Y .:	
		Pittsburgh, PA 15219		<u> </u>	IT
	Director:	Bruce Semper	FLOR	13 PM I2: 36	C
	Address:	1891 Eglinton Avenue East	D'A	ð	
	_	Scarborough Ontario M1L2L7 Canada			
В.	OFFICERS		_		
	President: _	Harrison R. Horan			
	Address: _	501 Park East Blvd.			
	_	New Albany, IN 47150			
	Vice President:		, -		
	Address: _				
	_				

Miles E. Holsworth

501 Park East Blvd.

New Albany, IN

. . .

47150

Secretary:

Address:

Treasurer:	Miles E. Holsworth
Address:	501 Park East Blvd.
	New Albany, IN 47150
	may attach an addendum to the application listing additional officers
(Signature of Chairman application)	, Vice Chairman, or any officer listed in number 12 of the
14. Miles E.	. Holsworth, Secretary/Treasurer
(Typed or printed name	and capacity of person signing application)

98 MAY 13 PH 12: 36
SECRETARY OF STATE
TALLAHASSEE FLORIDA

State of Delaware

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "CONFORMA CLAD 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 TWELFTH DAY OF MAY, A.D.
1998.

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.

98 MAY 13 PH 12: 36
SECRETARY OF STATE TALLAHASSEE FLORIDA



Edward J. Freel, Secretary of State

AUTHENTICATION:

9076491

DATE:

05-12-98

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