F980 TRAMINAL DETER 3239

TO: Qualification/Tax Lien Section Division of Corporations

SUBJECT: LOK-TITE INDUSTRIES, INC.

(Name of corporation - must include suffix)

Dear Sir or Madam:

700002552357---5 -06/03/98--01028--084 *****70.00 ******70.00

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:

ROBERT KAYE	<u>.</u>	
(Name of Person)		
LOK-TITE INDUSTRIES, INC.		***
(Firm/Company)	98	DIV.S
3343 WASHINGTON BLVD		SITH
(Address)	19	
BALTIMORE, MD 21227		37 ED
(City/State/Zip)		IS.
Should you need to call someone concerning this matter, please	call: 59	STATE 6/9
ROBERT KAYE	at 410-247-5300	~/
(Name of Person)	(Area Code & Daytime Telepho	one Number)

COURIER ADDRESS:

Qualification/Tax Lien Sec. 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

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.	LOK-TITE INDUSTRIES, INC.								_
	(Name of corporation: must include the word "INCORPORATE of like import in language as will clearly indicate that it is a co contained in the name at present.)	ED"	r, "COMPA! oration inste	NY", "COI ad of a nat	RPORATION	N" or wo	ords or a ership i	abbreviation f not so	S
2.	MARYLAND	3.	52-072	9600	-				
	(State or country under the law of which it is incorporated)		far gr	(F	EI number,	if applic	able)		
4.	FEBRUARY 11, 1960	5.	N/A		-				
	(Date of Incorporation)		(Duration: Year corp. will cease to exist or "perpetual")			r			
6.	JULY 1, 1998								
	(Date first transacted business in Florida. (SEE SE	ECT	TIONS 607.	1501, 607.	1502, AND	817.155	, F.S.)		
7.	3343 WASHINGTON BLVD.			.	· · · · · · · · · · · · · · · · · · ·		. <u>-</u>	<u>-</u> .	_
	BALTIMORE MD 21227							·	
(Current mailing address) 8 SALE OF SIGNS						SE SE	-		
_	(Promosola) of comporation authorized in home sta	te c	or country to	be carried	l out in the s	tate of F	lorida)	- - 2	
9	Name and street address of Florida registered age Name: ROBERT ALTSHULER Office Address: 8449 LEGEND CLUE	nt	: (P.O. Bo	ox or Mai	l Drop Bo	x <u>NOT</u>	accer	table)	
	Name: ROBERT ALTSHULER		···		-	-	<u>.</u>	INT S	
	Office Address: 8449 LEGEND CLUE	3 I	DRIVE				è	9 9	
	WEST PALM BEACH	•		, Florida,	33412 (Zip Co	de)			

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. Ifurther agree to comply with the provisions of all staffites 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) A. DIRECTORS (Street address only- P. O. Box NOT acceptable) Chairman: Address: Vice Chairman: Address: Director: ROBERT ALTSHULER Address: 8449 LEGEND CLUB DRIVE WEST PALM BEACH, FL 33412 ROBERT KAYE Director: Address: 3511 OLD COURT ROAD BALTIMORE, MD 21208 B. OFFICERS (Street address only- P. O. Box NOT acceptable) ROBERT ALTSHULER President: Address: 8449 LEGEND CLUB DRIVE WEST PALM BEACH, FL 33412 Vice President: ROBERT KAYE Address: 3511 OLD COURT DRIVE BALTIMORE, MD 21208 Secretary: ROBERT KAYE Address: ____ SAME AS ABOVE Treasurer: _____ROBERT ALTSHULER Address: SAME AS ABOVE NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14 ROBERT ALTSHULER, PRESIDENT (Typed or printed name and capacity of person signing application)

STATE OF MARYLAND

641145

STATE DEPARTMENT OF ASSESSMENTS AND TAXATION

301 West Preston Street Baltimore, Maryland 21201

I, GLORIA J. WATSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT SAID DEPARTMENT, BY THE LAWS OF SAID STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATE CHARTERS, OR OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE; AND I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT LOK-TITE INDUSTRIES, INC.
IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND SAID CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN THE STATE OF MARYLAND.

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IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE THIS 4TH DAY OF JUNE, 1998.

GLORIA J./NATSON OFFICE SUPERVISOR II

AT5-031