TRANSMITTAL LETTER

•	cation/Tax Lien S					
SUBJECT:	_ •	ScandinaviA	Inc.			
		(Name of corporatio	n - must include su	ffix)		
Dear Sir or Mad	iam:		Ē	****	2 688 7/9801 *78.75	7826 010002 *****78.75
	Existence", and c	oreign Corporation for heck are submitted to r				
Please return all	l correspondence	concerning this matter	to the following:			
	S0~	dna A. Som	mers		_	
		(Name of	Person)		_	
	Roya	L 5 candinavia (Firm/Co	Inc.			
	·	(Firm/Co	mpany)		96	0 Y 10 Y
	140 Brad	ford Drive			98 NOV 17	SECOND SE
		(Addı	ress)			321
	West Be	erlin, Not 08	091		-	500 500 500
		(City/Sta	te/Zip)		AM 10: 30 1	STATE OF THE STATE
Should you nee	d to call someon	e concerning this matte	r, please call:		30	myrtn.
Sonarp	Sommens	at (609	1768-5400	<i>E</i> 4T.	208	11/17
(Name of Person) (Area Code & Daytime Telephone Number)						

STREET 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

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. ROYA	L Scandinavi	A, Incorpor	ated			
(Name of cor words or abbi	poration; must include the w reviations of like import in la n or partnership if not so com	ord "INCORPORAT inguage as will clearl	ED", "COMPAI y indicate that i			_
naturar persor	Tor partiersmp it not so con-	amed in the name at	present.)			
2. Penn	sylvania		3. 2	3-0582990		
(State or coun	sy 1000 a try under the law of which it	is incorporated)		(FEI number, if applica	ible)	_
47	2 \ 28 \ 23 Date of incorporation)	5	Per petu	a L		
		(Du	ration: Year co	rp. will cease to exist or	"perpetual")	
6	10/1/98				•	_
	irst transacted business in Flo	•	NS 607.1501, 6	07.1502 and 817.155, F.S	S.)	
7. 140	Brad ford Dai	10				-
West	BURLIN, NJ	08091			_	
	(Current mailing addr	ress)		98	် တ
O 1	•			_	AON 86	ECS.
8. Keta	IL STORE - 3	bal HARBOOR	. FLONIC) <i>(</i>		<u>≓</u> ¬
	se(s) of corporation authorize		•			37 EC
9. Name and s	treet address of Florida 1	egistered agent: (P.O. Box or M	fail Drop Box NOT acc	ceptable)	۳) د
Name:	treet address of Florida i	n System			irions: 30	7 T C
Office Address:	1200 S. Pin			u e e e e e	-	
	Plantation		, Florida,	33324	· -	
				(Zip code)		
10. Registered	agent's acceptance:					
in this applicatio comply with the	med as registered agent and m, I hereby accept the appoi provisions of all statutes rel bligations of my position as	ntment as registered ative to the proper ar	agent and agre	e to act in this capacity.	I further agree	e to
	ans) decarm		ANN J. WILL		
	0	egistered agent's sig	mature)	Assistant Vice P	'resident	

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: Olle MARKOO, AB Orrefors Glasbrull	
Address: S 380 40	
Occefors, Sweden	
Vice Chairman: Oyvind Sactre	
Address: 140 Brad ford Drive	
West Berlin, NJ 08091	7.7.1
Director: Bo Welander AB Orrefors Glashall	
Address: 5 380 40	
Orre fors, Sweden	
Director: LANS WESTMAN AB ONE Fors Glassonk	
Address: 5 380 40	
Orre fors, Sweden	-
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	_
President: Oyvind Sactre	SECRE SECRE
Address: 140 Brad ford Drive	V 17
West Berlin, No 08091	A CED
Vice President: Ana Maric Mc Ginnis	AMIO: 3
Address: 140 Brad fond Drive	O 35 _
WEST BERLIN, NJ 08091	-
V.P. Sales PanelA RYAN	
Address: 140 Brad ford Drive	
West Berlin, NJ 08091	<u>, , , , , , , , , , , , , , , , , , , </u>
V.P. Finance Treasurer: William Dougherty	
Address: 140 Brad ford Drive	
West Berlin, NJ 08091	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or direct	
10 Day	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application	on)
14. <u>VILLIM DOCUMENT UPPINEU</u>	
(Typed or printed name and capacity of person signing application)	•

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

SEPTEMBER 18, 1998

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

ROYAL SCANDINAVIA, INC.

SECRETARY OF STATE DIVISION OF COOPERATIONS

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

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