Qualification/Tax Lien Section To: Division of Corporations SUBJECT: Agile Manufacturing Solutions, 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: 600002691446--9 Scott D. Zaret 11,719,798---01052---005 (Name of Person) *****87.50 *****87.50 Brouse McDowell (Firm/Company) <u> 1001 Lakeside Avenue</u> (Address) Cleveland, Ohio 44114 (City/State/Zip) Should you need to call someone concerning this matter, please call: 216) 830-6830 Scott D. Zaret át (_ (Area Code & Daytime Telephone Number) (Name of Person) **MAILING ADDRESS:** STREET ADDRESS: Qualification/Tax Lien Section Qualification/Tax Lien Section Division of Corporations Division of Corporations P.O. Box 6327 409 E. Gaines St. Tallahassee, FL 32314 Tallahassee, FL 32399 Enclosed is a check for the following amount: **⊠** \$87.50 Filing Fee, □ \$78.75 Filing Fee & □ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status & Certificate of Status Certified Copy

Certified Copy

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. <u>Agi</u>	le Manufacturing Solutions, Inc.		
words or abbre	oration; must include the word "INCORPORATED", viations of like import in language as will clearly ind	icate that it is a cornoration instead of a	
natural person	or partnership if not so contained in the name at presi	ent.)	
2Ohi	3.	• • • • •	
(State or country	y under the law of which it is incorporated)	(FEI number, if applicable)	-
4Nov	ember 25, 1997 5. Fe	rpetual	
(Da	ember 25, 1997 5. Fer te of incorporation) (Duration	: Year corp. will cease to exist or "perpetual	l")
6. <u>Nov</u>	ember 15, 1998		o o
	t transacted business in Florida.) (SEE SECTIONS 6	,	SECRETAR VISION 19
7. <u>450</u>	Darrow Road, Stow, Ohio 44224-1898	3	
			ं र्रेडिंग
	(Current mailing address)		
			2: 0
8. <u>Any</u>	lawful purpose for which corporation	ons may be formed	S 35
(Purpose)	s) of corporation authorized in home state or country	to be carried out in state of Florida)	
9. Name and str	eet address of Florida registered agent: (P.O	. Box or Mail Drop Box NOT acceptabl	(e)
Name:	Herman Spencer	<u>.</u>	
Office Address:	15350 Amberly Drive, Suite 1314		
	Tampa	33647	
	Tampa	(Zip code)	
	_	(Zip code)	
10. Registered a	gent's acceptance:	-	
with the provisions	d as registered agent and to accept service of processivereby accept the appointment as registered agent a of all statutes relative to the proper and complete pay position as registered agent.	nd agree to act in this capacity. I further a	araa ta aamab
	(Registered agent's signatu	re)	
11. Attached is a condensation of States which it is income.	ertificate of existence duly authenticated, not more the by the Secretary of State or other official having cu	an 90 days prior to delivery of this application	on to the under the law of

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

which it is incorporated.

	TORS (Street address only - P.O. Box NOT acceptable)		
Chairman: _	Herman Spencer		
Address:	4560 Darrow Road, Stow, Ohio 44224-1898		
_			·
Vice Chairm	nan;		·
Address:			
		<u></u>	
Director: _			
Address:			
		<u>-</u>	
Director: _			
Address:		98	<u> </u>
_		NO	58 - CT_
	ERS (Street address only - P.O. Box NOT acceptable)	19	
	Herman Spencer	- P	<u>3</u> 90
Address: _	4560 Darrow Road, Stow, Ohio 44224-1898	200	<u>72</u>
			ijρ
Vice Preside	ent:		
Address:			
_			
Secretary: _	Herman Spencer		
Address: _	4560 Darrow Road, Stow. Ohio 44224-1898		
_			
Treasurer:	Herman Spencer		
Address: _	4560 Darrow Road, Stow, Ohio 4422441898		
_	- 1.01 To 1.01		
NOTE: If	f necessary, you may attach an addendum to the application listing additional officers and/or directors.		
13			
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)		
14.	Herman Spencer Passident (Typed or printed name and capacity of person signing application)		

UNITED STATES OF AMERICA, STATE OF OHIO, OFFICE OF THE SECRETARY OF STATE.

I, Bob Taft, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show AGILE MANUFACTURING SOLUTIONS, INC., an Ohio Corporation, Charter No. CP1085, principal location in Stow, County of Summit, incorporated on November 25, 1997, is currently in GOOD STANDING upon the records of this office.

SECRETARY OF STATE OF

WITNESS my hand and official seal at Columbus, Ohio on November 10, 1998

Bob Taft Secretary of State