

F98000006554

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: FARIA Limited Company
(Name of corporation - must include suffix)

00002698937--9

-12/01/98--01059--003

****122.50 *****78.75

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:

THOMAS Speed, Controller

(Name of Person)

SHEFFIELD LABORATORIES, DIVISION OF FARIA Limited Company

(Firm/Company)

170 BROAD ST

(Address)

NEW LONDON, CT 06320

(City/State/Zip)

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

THOMAS Speed

(Name of Person)

at (860) 442-4451

(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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 DEC - 1 AM 11:32

mt
12/2

**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. FARIA Limited Company
(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. CONNECTICUT
(State or country under the law of which it is incorporated)
3. 06-1178451
(FEI number, if applicable)
4. 8-29-86
(Date of incorporation)
5. PERPETUAL
(Duration: Year corp. will cease to exist or "perpetual")
6. NOT DOING SO YET - WOULD LIKE TO PARTICIPATE IN STATE CONTRACT
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 170 BROAD ST.
NEW LONDON, CT 06320
(Current mailing address)
8. TO SELL TOOTH PASTES, CREAMS & OINTMENTS WE MANUFACTURE IN CT.
(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 Mail Drop Box NOT acceptable)
Name: CT CORPORATION SYSTEM
Office Address: 1200 SOUTH PINE ISLAND RD.
PLANTATION, Florida, 33324
(Zip code)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 DEC -1 AM 11:32

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.


EDWARD GWISDALLA
(Registered agent's signature) Assistant Vice President

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: THOMAS G. FARIA

Address: 17 PARK DRIVE

WATERFORD, CT 06385

Director: _____

Address: _____

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

President: THOMAS G. FARIA

Address: 17 PARK DRIVE

WATERFORD, CT 06385

Vice President: JAMES DAVIS

Address: 136 LISBON ROAD

CANTERBURY CT 06331

Secretary: THOMAS G. FARIA

Address: 17 PARK DRIVE

WATERFORD, CT 06385

Treasurer: THOMAS G. FARIA

Address: 17 PARK DRIVE

WATERFORD, CT 06385

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

13. Thomas G. Faria
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. THOMAS G. FARIA, PRESIDENT
(Typed or printed name and capacity of person signing application)


FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 DEC - 1 AM 11:32

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State,
and keeper of the seal thereof, DO HEREBY CERTIFY, that

FARIA LIMITED

incorporated under the laws of Connecticut is in existence.



Secretary of the State

Date Issued: November 17, 1998

FILED
SECRETARY OF STATE
DIVISION OF RECORDS
98 DEC -1 AM 11:32