-980 (TRANSMITTAL LEPTER) 6627

Qualification/Tax Lien Section Division of Corporations

SUBJECT: J.T. Specialties Inc. / DBA identi-Graphics
(Name of corporation - must include suffix)

Dear Sir or Madam:

700002688117--0 -11/16/38--01075--003

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida*****87.50 "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concern	ing this matter to the following:	W98-25834
Т	homas E. Nelson	0 (0 - 2)-0 / 1
	(Name of Person)	
	identi-Graphics	
	(Firm/Company)	,
866	50 Hwy. 7 Box 160	
	(Address)	• 1
St. Boni	facius, MN 55375-0160	- VC
	(City/State/Zip)	7AL 98 12/7
Should you need to call someone concer	ning this matter, please call:	98 DEC -7 F SECRETARY O ALLAHASSEE
Tom Nelson (Name of Person)	at (612)446-1172 (Area Code & Daytime Tele	phone Number PATE TO

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 DETURN TO:
MAGGIEWRIGHT

COLLIER CTY GOVT

2800 N. Horsenhoe Dr.

Naples 34184

941 403 2432

per Mr. Nelson by phone 12/3



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

November 17, 1998

THOMAS E. NELSON IDENTI-GRAPHICS 8660 HWY. 7 BOX 160 ST. BONIFACIUS, MN 55375-0160

SUBJECT: J.T. SPECIALTIES "INCORPORATED"

Ref. Number: W98000025834

We have received your document for J.T. SPECIALTIES "INCORPORATED" and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

It appears that you are trying to file an authorization for a foreign corporation, and that you wish to file so that the corporation can use a name other than its own corporate name. You may do this by filing this form for the corporation, and a Fictitious Name application for the second name. This application concerns the corporation only. A Fictitious Name application is being mailed to you separately.

We are returning the certificate you submitted, as it is for your Assumed Name, rather than for your corporation.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6958.

Lee Rivers Document Specialist

Letter Number: 198A00055195



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

November 30, 1998

THOMAS E. NELSON IDENTI-GRAPHICS 8660 HWY. 7 BOX 160 ST. BONIFACIUS, MN 55375-0160

SUBJECT: J.T. SPECIALTIES "INCORPORATED"

Ref. Number: W98000025834

We have received your document for J.T. SPECIALTIES "INCORPORATED" and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

Thank you for submitting the certificate of existence requested in our previous letter. You must still correct line 1 and complete line 6, as requested; please refer to the highlighted copy of our previous letter, attached.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6958.

Lee Rivers Document Specialist

Letter Number: 798A00056666

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.

J.T. Specialties , The.

Minnesota	<u> </u>		3	4/ -134 - (FEI nu	7757	
State or country	under the law of which it is i	ncorporate	ed)	(FEI nu	mber, if applica	ible)
8/11/1978		5	Perpetual			
•	e of incorporation)		(Duration:	Year corp. will c	ease to exist or	"perpetual")
upon	Qualification		•			<u>-</u>
(Date firs	transacted business in Florida	L) (SEE S	ECTIONS 607	.1501, 607.1502 a	nd 817.155, F.	S.)
8660 Hwy. 7	Box 160					
St Bonifacii	s, MN 55375-0160					
Ot. Dornidoit		rent maili	ing address)			
(Purpose	f Signs and Decais (s) of corporation authorized in eet address of Florida regi		-		Č	7 7
•					,	()
. Name:	Thomas E. Neison		,		97	
Name:	Thomas E. Nelson 26440 Summer Greens D	rìve			eriba) PATE
	.,		, I	Florida, <u>34135</u> (Zip co		PAJE
fice Address:	26440 Summer Greens D Bonita Springs		, I	Tlorida, <u>34135</u> (Zip co	de)) 2: 10
fice Address:	26440 Summer Greens D		, I		de)	PATE
Tice Address: Registered aving been name this application mply with the particular application mply with the particular application mply with the particular application apply with the particular application application apply with the particular application ap	26440 Summer Greens D Bonita Springs	accept ser nent as re e to the p	vice of process gistered agent roper and com	(Zip co for the above sta and agree to act i	ted corporation n this capacity.	. I further agree
fice Address: Registered a wing been name this application inply with the p	26440 Summer Greens D Bonita Springs gent's acceptance: ad as registered agent and to a I hereby accept the appointmentions of all statutes relative	accept ser nent as re e to the p	vice of process gistered agent roper and com	(Zip co for the above sta and agree to act i	ted corporation n this capacity.	. I further agree

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. DIRECT	ORS (Street address only - P.O. Box NOT acceptable)	
Chairman: _	Thomas E. Nelson	
Address:	26440 Summer Green Drive	
	Bonita Springs, FL 34135	
Vice Chairm	an: Patricia A. Nelson	
Address:	26440 Summer Green Drive	
	Bonita Springs, FL 34135	. =
Director:	Kathleen Neison	
Address:	9170 Co. Rd. 36	7, S 98
	Cologne, MN 55322	
Director:	Sue Nelson	TAKU ASS
Address:	32 West 13th St. B-104	P. P. P.
	Waconia, MN 55387	STAT STAT
B. OFFIC	ERS (Street address only - P.O. Box NOT acceptable)	OA O
President:	Thomas E. Neison	
Address:	26440 Summer Green Drive	
	Bonita Springs, FL 34135	
Vice Preside	nt: Patricia A. Nelson	
Address:	26440 Summer Green Drive	
	Bonita Springs, FL 34135	
Secretary: _	Kay Nelson	
Address:	9170 Co. Rd. 36	·
	Cologne, MN 55322	
Treasurer: _	Sue Nelson	
Address:	9170 Co. Rd. 36	
	Cologne, MN 55322	
NOTE: If	necessary, you may attach an addendum to the application listing	ng additional officers and/or directors.
13	Thomas & Telson	
T	(Signature of Chairman, Vice Chairman, or any officer lishomas E. Nelson President	sted in number 12 of the application)
14	(Typed or printed name and capacity of	nerson signing application)

state of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

I, Joan Anderson Growe, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: J. T. Specialties, Inc.

Date Formed: 08/11/1978

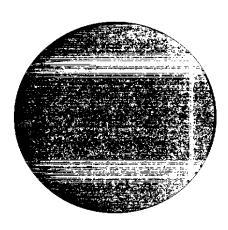
Chapter Governed By: 302A

This certificate has been issued on 11/19/98.

FILED

18 DEC -7 PM I2: 10

SECRETARY OF STATE



Joan Anderson Grove Secretary of State.