

F98000006719

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: Scott Specialty Gases, 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:

Lois Hayes 500002708845--4
(Name of Person) -12/10/98-01055-001
*****70.00 *****70.00

Scott Specialty Gases, Inc.
(Firm/Company)

644 Easton Rd PO Box 310
(Address)

Plumsteadville, PA 18949
(City/State/Zip)

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

Lois Hayes at (215) 766-8861 ext. 241
(Name of Person) (Area Code & Daytime Telephone Number)

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DIVISION OF CORPORATIONS

mt
12/10

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

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & 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. Scott Specialty Gases, Inc.
(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. PA 3. 23-1574677
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. June 20, 1960 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 10/1/98
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 6141 Easton Rd. P.O. Box 310
Plumsteadville, PA 18949
(Current mailing address)

8. Distribution of Specialty Gases
(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: C.T. Corporation system

Office Address: 1200 South Pine Island Rd.

Plantation, Florida, 33324
(Zip code)

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.

Ann J. Williams
(Registered agent's signature)

ANN J. WILLIAMS
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.

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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: See Attached

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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

President: See Attached

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. [Signature]

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. J. Fredrick Mertz

Chairman

(Typed or printed name and capacity of person signing application)

Corporate Officers

J. Fredrick Merz, Jr. President, 163-28-0510
2060 Twinbrook Rd., Berwyn, PA 19312 215-766-8861

Robert Squires, Vice President of Administration, 136-34-2304
1501 Wilson Lane, Perkasié, PA 18944 215-766-8861

Sally Michener, Corporate Secretary, 199-30-2252
486 W. Broad St., Telfor, PA 18960

Alice Ziegler, Assistant Corporate Secretary, 139-42-2961
130 Shewell Ave, Doylestown, PA 19801

Directors

Joseph L. Ponce,
150 Estrada Maya, Santa Fe, NM 87501

Seymour S. Preston, III
41 Leopard Road, Paoli, PA 19301

J. Frederick Merz, Jr.,
2060 Twinbrook Road, Berwyn, PA 19312

J. Frederick Merz, III
227 Elmer Street, Westfield, NJ 07090

Lou Gomez
1237 Sugartown Road, Berwyn, PA 19312

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COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

SEPTEMBER 11, 1998

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

SCOTT SPECIALTY GASES, INC.

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.

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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.

A handwritten signature in dark ink, appearing to read "G. Vetter", is written over a horizontal line.

Secretary of the Commonwealth

DPOS