99000002540



ACCOUNT NO. : 07210000032

REFERENCE :

242512

AUTHORIZATION

COST LIMIT : \$ 70.00

ORDER DATE: May 17, 1999

ORDER TIME :

9:56 AM

ORDER NO. : 242512-005

CUSTOMER NO:

4312752

300002878513---4

CUSTOMER: Peggy A. Olko, Legal Asst

Shipman & Goodwin Llp

One American Row

Hartford, CT 06103-2819

FOREIGN FILINGS

NAME: ERGO SYSTEMS INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY

____ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSONGLY ANGLES OF CENTRAL STORY OF CONTACT PERSONGLY AND THE CONTACT PERSONGLY AND THE CONTACT PERSONGLY AND THE CONTACT PERSONGLY AND THE CONTACT PERSONAL PROPERTY OF CONTACT PERSONAL PROPERTY PERSON

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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. | Ergo Systems 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. | Connecticut 3. #06-1235502 | | | | | | |
| ۷. | (State or country under the law of which it is incorporated) (FEI number, if applicable) | | | | | | |
| 4. | February 24, 1988 5. Perpetual | | | | | | |
| •• | (Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual") | | | | | | |
| 6. | When authorized to do so | | | | | | |
| ٠. | (Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.) | | | | | | |
| 7. | 410 Prospect Street | | | | | | |
| | East Hartford, CT 06108 | | | | | | |
| | (Current mailing address) | | | | | | |
| Manufacturer/Dealer for Office Furniture and Equipment as well as engage in 8. any lawful act or activity for which corporation may be formed. | | | | | | | |
| | (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Figida) | | | | | | |
| 9. | Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) | | | | | | |
| | တို့ရှိ ထ 🖫 | لنعير | | | | | |
| | Name: Corporation Service Company | Ĕ | | | | | |
| | Name: Corporation Service Company Office Address: 1201 Hays Street ORD 23 | *** | | | | | |
| | Tallahassee , Florida , 32301 ▶ | | | | | | |
| 10 | (Zip Code) | | | | | | |
| co reg all an | aving been named as registered agent and to accept service of process for the above stated rporation at the place designated in this application, I hereby accept the appointment as gistered agent and agree to act in this capacity. I further agree to comply with the provisions of I statutes relative to the proper and complete performance of my duties, and I am familiar with d accept the obligations of my position as registered agent. Corporation Service Company By: (Registered agent's signature) | | | | | | |
| 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: See attached officers/directors rider | <u>.</u> . | |
| Address: | | |
| | | |
| Vice Chairman: | | |
| Address: | | |
| | | a a |
| Director: | _ | |
| Address: | | . e id * |
| | _ | |
| Director: | | |
| Address: | — – | |
| | | - |
| B. OFFICERS (Street address only-P. O. Box NOT acceptable) | | |
| President: See attached officers/directors rider | <u> </u> | _ |
| Address: | . | |
| | | |
| Vice President: | | |
| Address: | | |
| | | |
| Secretary: | | |
| Address: | 99∭ | |
| | | |
| Treasurer: | | |
| Address: | PM 2: | |
| | —∾ | |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors | | |
| Star Star | | |
| 13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) | _ | |
| | | |

14. Steven L. Bender, President

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

ERGO SYSTEMS, INC.

Officers and Directors

| Name | Title | Business | Residence |
|---------------------|---|---|---|
| Steven L. Bender | President and Director | 410 Prospect Street E. Hartford, CT 06108 | 66 Wynnwood Drive Fairfield, CT 06432 |
| Donald E. Griesdorn | Secretary/ Treasurer and Director | 300 East River Drive E. Hartford, CT 06108 | 74 Whetten Road W. Hartford, CT 06117 |
| Peter J. Murgio | Assistant Secretary and Director | 300 East River Drive E. Hartford, CT 06108 | 16 Pinnacle Mountain Road Simsbury, CT 06070 |

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SECRE FARY OF STATE
TALLAHASSEE, FLORID.

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

ERGO SYSTEMS INC.

incorporated under the laws of Connecticut is in existence.

Secretary of the State

Date Issued: April 29, 1999

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