## F99000003198

	ication/Tax Lien Secti on of Corporations	on			
	Normac Kitch	none Inc			
SUBJECT: _			tion - must include suffix)	)	<del></del>
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Dear Sir or Ma	adam:				
The enclosed 'Certificate of transact busine	Existence", and check	en Corporation for are submitted to	or Authorization to Transa o register the above referen	ect Business in Fl nced foreign corp	orida", oration to
Please return a	all correspondence con	cerning this matt	ter to the following:		_ 0
	Judy A. Hancik				99,
	Oddy A. Hareers		of Person)		
	Normac Kitchen:	e Tnc			
	Noniae Artenen		Company)		₹ 76
		`			œ <u> </u>
	9115 Old State		ddress)		<b>5</b> 등째
		•			+
	Charlotte, N.C		State/Zip)		ymh
		(City/i	State/Lip)		6/8
Should you no	eed to call someone co	nceming this ma		0000291 -06/18/99 ******70.	08665- 9010460 ,00 ******
Judy Hand	cik	at (704	) 598-4455		<u> </u>
(Nan	ne of Person)	(Aı	rea Code & Daytime Tele	phone Number)	
STREET AD	DRESS:		MAILING ADDRE	SS:	
•	Tax Lien Section		Qualification/Tax Lie		
Division of C	orporations		Division of Corporati P.O. Box 6327	ions	
	i DL		- · - · - · · · · · · · · · · · · · · ·	14	
409 E. Gaines Tallahassee, F	L 32399		Tallahassee, FL 323	17	

## 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.	Normac Kitchens, 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.	Missouri 3. 43-1649579	<u></u>	-
(	(State or country under the law of which it is incorporated) (FEI number, if applicable)		
4.	7-22-93 Date of incorporation)  Ouration: Year corp. will cease to exist or "perp	1995	
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perp	etual")	
6.	May 1999	2	<u> </u>
	May 1999  (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)		25 25 25 25 25 25 25 25 25 25 25 25 25 2
7.	9115 Old Statesville Road, Suite C		<u> </u>
	Charlotte, N.C. 28269		<u> </u>
	(Current mailing address)	3	<b>F</b> O .
		က္ - <del>ှု</del>	걸
8.	New contract in Florida	<u>၂</u>	<b>፫ባ</b> 
٠.	(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 accepta	ble)	
	Name: C. T. Corporation System		
Oí	ffice Address: 1200 S. Pine Island Road	-	
	73274		
	Plantation, , Florida, 33324 (Zip code)		
Н	). Registered agent's acceptance:  aving been named as registered agent and to accept service of process for the above stated corporation at the this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I fu	e place desig other agree to	nated
co	omply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the obligations of my position as registered agent.  (Registered agent's signature)  ASSISTANT SECRE	am familiar	with

<sup>11.</sup> 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: Address: Address: B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: \_ Hans G. Marcus Address: 59 Glen Cameron Road \_\_\_\_ Thornhill, Ontario, Canada L3T-1N8 Vice President: Address: Secretary: \_ Hans G. Marcus Address: \_\_\_ 59 Glen Cameron Road Thornhill, Ontario, Canada, L3T-1N8 Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Hans G. Marcus, President/Secretary

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





## Rebecca McDowell Cook Secretary of State

CORPORATION DIVISION
CERTIFICATE OF CORPORATE GOOD STANDING

I, REBECCA McDOWELL\_COOK, SECRETARY OF STATE OF THE STATE OF MISSOURI, DO HEREBY CERTIFY THAT THE RECORDS IN MY OFFICE AND IN MY CARE AND CUSTODY REVEAL THAT

NORMAC KITCHENS, INC.

WAS INCORPORATED UNDER THE LAWS OF THIS STATE ON THE 22ND.

DAY OF JULY, 1993, AND IS IN GOOD STANDING, HAVING FULLY

COMPLIED WITH ALL REQUIREMENTS OF THIS OFFICE THE

IN TESTIMONY WHEREOF, I HAVE SET MY HAND AND IMPRINTED THE GREAT SEAL OF THE STATE OF MISSOURI, ON THIS, THE 30TH DAY OF MARCH, 1999.

Secretary of State

