

ACCOUNT NO. : 072100000032

REFERENCE : 408485

4379710

AUTHORIZATION

COST LIMIT

ORDER DATE: October 12, 1999

ORDER TIME: 3:20 PM

ORDER NO. : 408485-115

500003068455--4

CUSTOMER NO: 4379710

CUSTOMER: Mr. Ronald Fuss

Carlisle Companies Inc.

Suite 201

250 South Clinton Street

Syracuse, NY 13202

FOREIGN FILINGS

NAME:

CARLISLE SYNTEC INCORPORATED

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Tamara Odom

## 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. CARLISLE SYNTEC INCORPORATED	<u></u>
(Name of corporation: must include the word "INCORPORATED" of like import in language as will clearly indicate that it is a corpo contained in the name at present.)	, "COMPANY", "CORPORATION" or words or abbreviations or attended a natural person or partnership if not so
2. DELAWARE	16-1449809
2. DELAWARE3. (State or country under the law of which it is incorporated)	(FEI number, if applicable)
4 DECEMBER 7, 1993 5.	PERPETUAL
(Date of Incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6. upon qualification	
(Date first transacted business in Florida. (SEE SECT	TONS 607.1501, 607.1502, AND 817.155, F.S.)
7. 250 SOUTH CLINTON STREET, SUITE 201	<del></del>
SYRACUSE NY 13202	_
(Current maili	ng address)
8 SALES OF COMMERCIAL AND INDUSTRIAL RO	OOFING PRODUCTS
(Purpose(s) of corporation authorized in home state of	or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent	
Name: CORPORATION SERVICE COM	PANY
Office Address: 1201 HAYS STREET	<u>-</u>
TALLAHASSEE	, Florida, 32301
	(Zip Code)
10. Registered agent's acceptance:	
Having been named as registered agent and to accept set place designated in this application, I hereby accept the capacity. Ifurther agree to comply with the provisions of all of my duties, and I am familiar with and accept the obliging	appointment as registered agent and agree to act in this I statutes relative to the proper and complete performance
ViduSchrube	ast. VP.
(Registered age	nt's signature) Vicki Schreiber, Asst. V.P.

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)

14.	Tidition and address and a	
	DIRECTORS (Street address only-	D O D - NOT a secretable)
1.	DIDECTODE (Ctuant address only-	P O BOY NULL ACCEDIADIEL
Δ.	DIRKE TURS ISTREE address only	1. O. Box 110 1 deception
	DIAL CALC	

Chairman:	STEPHEN P MUNN	.5		
Address:	250 SOUTH CLINTON STREET,	SUITE	201	<del>人</del>
<u> </u>				(1) 1.51.3.1.1
Vice Chairman:			ζ', '	
		<u>=</u>	<u> </u>	$\frac{\alpha_{i}}{Y_{i}}$ $\frac{\alpha_{i}}{\lambda_{i}}$
Director:	DENNIS J HALL	<i></i>		
Address:	250 SOUTH CLINTON STREET,	SUITE	201	
				<del></del>
Director:	STEVEN J FORD	= - 		
Address:	250 SOUTH CLINTON STREET,	SUITE	201	
	SYRACUSE, NY 13202			
	(Street address only- P. O. Box NOT a			
	JOHN W ALTMEYER			
Address:	250 SOUTH CLINTON STREET,	- SUITE	201	_ · ·
Addicss.	SYRACUSE, NY 13202			
Vice President	DENNIS J HALL	-		
	250 SOUTH CLINTON STREET,			<del></del>
Address.				
Cooratory:	STEVEN J FORD	-		<del></del>
Address:	250 SOUTH CLINTON STREET,	SUITE		
Address	SYRACUSE, NY 13202			
Tronguror	ROBERT J RYAN, JR			
Treasurer:Address:	250 SOUTH CLINTON STREET,	SUITE	E 201	
NOTE: If neces	SYRACUSE, NY 13202 ssary, you may attach an addendum to th	e applica	ation listing additional officers and/or dire	ctors.
13	(Signature of Chairman, Vice Chairman, or an	y officer l	isted in number 12 of the application)	
14. STEVEN 3	J FORD, SECRETARY  (Typed or printed name and capa	city of per	rson signing application)	-

## State of Delaware

## Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY \*CARLISLE SYNTEC INCORPORATED\* IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWELFTH DAY OF OCTOBER, A.D. 1979.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES

HAVE BEEN PROTO TO DATE

AND TO DO HERE DEFORTHER CERCITEY THAT THE ANNUAL REPORTS HAVE





Edward J. Freel, Secretary of State

AUTHENTICATION:

0019927

DATE:

10-12-99

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