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FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302 PHONE: (850) 668-4318 FAX: (850) 668-3398

DATE: 10-24-01

MEARS NAME: MEBASVCPG, LLC

TYPE OF FILING: QUALIFICATION

COST: CHECK FOR \$125 ATTACHED

700004652987- 4 -10/25/01-01035-007 ****125.00 ****125.00

RETURN:

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AUTHORIZATION: ABBIE PAUL HODGE

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JB 7501

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

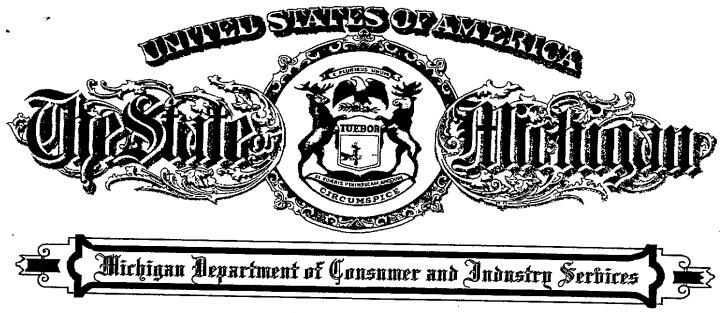
Mears/CPG LLC	
(Name of foreign limited liability company)	
Michigan (Jurisdiction under the law of which foreign limited liability company is organized) 3. N/A (FEI number, if applicable)	
Date of Organization) 5. Perpetual (Duration: Year limited liability company of exist or "perpetual")	will cease to
Upon qualification	
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)	
4500 N. Mission Road	
Rosebush, MI 48878	
(Street address of principal office)	
If limited liability company is a manager-managed company, check here	
The name and usual business addresses of the managing members or managers are as follows:	ws:
Mears Group, Inc.	
4500 N. Misison Road	
Rosebush, MI 48878	
Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a for translation of the certificate under oath of the translator must be submitted.)	custody of recon
. Nature of business or purposes to be conducted or promoted in Florida: Provide contrac	ting S
Signature of a phember or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	29.27
Joyce Kao Soliman, Vice President Typed or printed name of signee	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of	the Limited Liability Comp	pany is:				
Mears/CPG,	LLC			28 -		
2. The name an	d the Florida street address	of the registere	d agent and office a	re:		
	Capitol C	orporate Servi	.ces, Inc.			
		(Name)				
	133	3 N. Duval Str	reet .			
	Florida street add	dress (P.O. Box <u>N</u> O	OT ACCEPTABLE)	-	•	•
	Tallahassee	FL	32303_			
	(City/State/Zip)		.	• •	•
liability compan registered agent statutes relating	ned as registered agent and vat the place designated in and agree to act in this cap to the proper and complete tions of my position as regi	this certificate, a acity. I further of performance of	I hereby accept the a agree to comply with my duties, and I am	ppointment as a the provisions of a familiar with and		A service

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)



Lansing, Michigan

This is to Certify That

MEARS/CPG LLC

a Michigan limited liability company, was formed on December 31, 1998.

I FURTHER CERTIFY that a Certificate of Dissolution has not been filed and the Articles of Organization are in full force and effect as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

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In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 23rd day of October, 2001

. Director

Bureau of Commercial Services