# F05000005941

(Re	questor's Name)	
(Add	dress)	
(Ad-	dress)	
(Cit	y/State/Zip/Phone	:#}
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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ALLAHASSEE, FLORIDA

### COVER LETTER

TO:	Registration Section Division of Corporations								
SUBJI	ECT:	Fine Light,	Inc.						
			(Name of co	orporation -	· must include	suffix)			
Dear Si	ir or Madan	n:							
"Certifi		olication by Fostence," and ch n Florida.							to
Please	return all co	orrespondence	concerning th	is matter to	the following	g;			
Jam	es F. Bo	ohrer							
			(	Name of Po	erson)				
Malle	or Clenc	lening Gro				<u></u>		212	
	(Firm/Company)					-Li			
511 \	Woodsc	rest Drive,	P.O. Box	<del></del>			7		
D/			. 47407 5	(Addres	<b>S</b> )		•	SSE	
BIOC	mingto	n, Indiana			d Zip code)	· ·			<del>نَّہ</del> ۔ -
			(CI	ty/State and	i Zip code)			ORNO	90
For fur	ther inform	ation concernin	ng this matter,	please cal	l:			2 7	
Jam	es F. B	ohrer	at (	812	336-020	00			
	(Name of	Person)		(Area Co	de & Daytime	e Telephor	ne Number)	-	
	Registration of Clifton Bu 2661 Exec	COURIER A on Section of Corporations uilding outive Center Cee, FL 32301	:		Regis Divis P.O. I	LING AD stration Section of Cor Box 6327 hassee, FL	ction porations		
Enclos	ed is a chec	k for the follow	ving amount:						
□ \$70	.00 Filing I		75 Filing Fee tificate of Sta		\$78.75 Filing Certified Cop			Filing Fee cate of Sta ed 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. Fine Light, li		A STATE OF THE STA
	orporation; must include "INCORPORATED, orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)
<sub>2.</sub> Indiana	3.	35-1883421
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)
4. <u>03/31/1993</u>	5.	Perpetual
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6		
		n Florida, if prior to registration) 502, F.S., to determine penalty liability)
7. 100 Founta	ain Square, Bloomington, Indi	ana 47404
	(Principal office add	ress)
100 Fount	ain Square, Bloomington, In	diana 47404
	(Current mailing add	lress)
8. Marketing	and advertising and all purpo	oses allowed by law
(Purpose(s	) of corporation authorized in home state or co	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
9. Name and stree	t address of Florida registered agent: (P.C	D. Box NOT acceptable)  Fig. 2.  On the second seco
Name:	Sherman Rogers	LORE OF
Office Address:	822 AIA North	
	Ponte Vedra Beach	
	(City)	(Zip code)
10 Deci-towed	49	

#### 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.

(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 business addresses of officers and/or directors:

## A. DIRECTORS NO DIRECTORS Chairman: \_\_\_\_ Address: Vice Chairman: Address: Director: Address: **B. OFFICERS** President: Sherman Rogers Address: 100 Fountain Square Bloomington, Indiana 47404 Vice President: None Address: Secretary: Sherman Rogers Address: 100 Fountain Square, Bloomington, Indiana 47404 Treasurer: None Address: \_\_\_\_\_ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application)

14. Sherman Rogers

## STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

CERTIFICATE OF EXISTENCE



To Whom These Presents Come, Greetings:

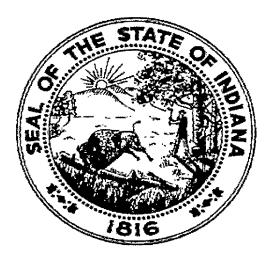
I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

#### FINE LIGHT INC.

duly filed the requisite documents to commence business activities under the laws of State of Indiana on March 31, 1993, and was in existence or authorized to transact business in the State of Indiana on September 16, 2005.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Sixteenth Day of September, 2005.

TODD ROKITA, Secretary of State

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