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(Re	questors Name)		
(Ad	dress)		_
(Ad	idress)		_
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(Cn	y/State/Zip/Phone	#)	
PICK-UP	WAIT	MAIL	
(Bu	siness Entity Nam	9)	_
			-
(Do	cument Number)		
Certified Copies	Certificates	of Status	
Special Instructions to	Filing Officer:	· · · · · · · · · · · · · · · · · · ·	1
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SECRETARY
TALLAHASSEE FINANCE

Office Use Offig

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## TRANSMITTAL LETTER

TO:	Registration S Division of Co			<del>==</del>			
SUBJ	ECT:	KARAVAN	TRAILERS,	INC.			
		(	Name of corpor	ation - must include suf	fix)	·	
Dear S	ìr or Madam:						
"Certif	closed "Applicate of Existentiate business in	ice", and chec	gn Corporation k are submitted	for Authorization to Tra to register the above ref	nsact Business i Terenced foreign	n Florida", corporation	
Please	return all corres	spondence cor	ocerning this ma	tter to the following:			
		ED DeTUN	co v.	P. FINANCE			
			(Name	e of Person)		₹.	
		KARAVAN	TRAILERS,	INC.		£3	
			(Firm/	Company)		AH OC	
		100 Kara	van Drive	P.O. Box	3. <b>7</b>	ASS	
	- Andries	TAA- Mara		ddress)	<u> </u>		
					-	AHII; 20 E. FLORIE	
		Fox <u>Lake</u>		933-0027	<u> </u>		
			(Chy/Sta	te and Zip code)		20 10	
For furt	her information	o concerning t	his matter, pleas	se call:		ì <u>.</u> .	
So	ott A. Bo	ovđ	_at ( 920	928-6200	Ext12	>5	
	(Name of Pers			ea Code & Daytime Tele			
CTDEE	er indrece			WAN DIG ADDD	<b>7</b> 00		
			MAILING ADDR Registration Sectio				
- · <del>-</del>			. —	Division of Corporations			
	99 E. Gaines St. P.O. Box 6327						
Tallaha	ssee, FL 32399	)		Tällahassee, FL 32	2314		
Enclose	d is a check for	the following	g amount:				
<b>Ø</b> \$70.0	00 Filing Fee		Filing Fee & eate of Status	S78.75 Filing Fee & Certified Copy	Certific	Filing Fee, cate of Status & ed Copy	

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607. I 503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1	KARA	VAN TRAIL	ERS, INC	<u> </u>	<u> </u>	<del></del> :
words or abbre	oration; must include the wiviations of like import in la or partnership if not so con	inguage as will cle	arly indicate th	PANY", "CORPORA at it is a corporation in	TION" or astead of a	
2	WISCONSIN		3. =	39-156109	90	
	y under the law of which it	is incorporated)		(FE) number, if a	pplicable)	
4.	AUGUST 1986		5	PERPETUAL		
(Da	te of incorporation)		(Duration	Year corp. will cease	e to exist or "per	petual")
6.	JUNE 20, 2003	•	<del>_</del>		A	
(Date first trans	acted business in Florida. (SEE :			ousiness in Florida, in and 817.155, F.S.)	sert "upon qualif	ication.")
7. 1599	Tionia road			ach, FL	_==	
		(Principal office a	address)			
100	Karavan Drive		ake, Wï	53933-0027	7	·
		(Current mailing s	iddress)			
(Purpose	D & ASSEMBLE W (s) of corporation authorize rect address of Florida	ed in home state or	country to be	carried out in state of		O3
y. Thathe and an	recensories of Provide	registered agen	.÷. ()	of Mail Diob Box I	ACCOLUMN.	000
Name:	CT Corporate	Systems	<u></u> -		3.	SS
Office Address:	1200 S. Pine	Island Ro	ad		-	
	Plantation		Flor	ida <u>33324</u> (Zip code)	- ÷ - \$	
	(City)		<del>-,=-</del>	(Zip code)		\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
Having been nai designated in thi further agree to	agent's acceptance: med as registered agent is application, I hereby a comply with the provisi funiliar with and accep	accept the appoi ons of all statute	ntment as reg es relative to 1	ristered agent and a he proper and com on as registered ago	gree to act in i plete performa ent.	this capacity. I nce of my
_		Registered agent's	s signature)	Bayer	lee Stuew	/e 

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

Chairman:	NONE	_ <b></b>	<u> </u>	<u> </u>		
Address: _		- T r) -	Super state of the super state o			, , , <u>, , , , , , , , , , , , , , , , </u>
_				<u> </u>	-	
Vice Chair	man: NONE	<u> </u>	<u> </u>	<u> </u>		
Address: _	<u></u>		***	<u>: 2</u>	,	<del></del>
_	the state of the s	<b>*</b>	. * ' .	, <u>sa</u>	<u> </u>	· · · · · · · · · · · · · · · · · · ·
Director: _	Scott A. Boyd			,		<b>v</b> .
Address: _	8515 Hickory Road, Beaver	Dam, WI.	53916		-8-	
_	<del></del>					03
Director: _	James A. Boyd			*	Žį.	S T
Address: _	W7458 Hillendale Pkwy, Be	aver_Dam,	WI 539	1.6	SSE SSE	- Jacobson
_				▼ 	TIE:	量 而
B. OFFI		-				<b>)</b> 1: 20
President:	Scott A. Boyd		·	14.5 <u>2</u> .	<u> </u>	
Address: _	8515 Hickory Road, Beaver	Dam, WI	53916	<u>.</u>	· <del></del>	
_			.:	- <b>2</b>	. , .	· • • •
Vice Presid	dent: <u>Michael J. Boyd</u>		- Edwa	rd E. D	eTuncq	<del></del>
Address: _	Box 217A, W2135 Hwy N		N751	4 Edgew	ater D	rive
_	Rubicon, WI 53078		- Beav	er Dam,	WI 5	3916
Secretary:	Yvonne Boyd	<u></u>	<u>::</u>			
Address: _	W7458 Hillendale Pkwy	. Beaver	Dam, WI	53916	_ <del></del>	
Treasurer:	James A. Boyd		<u> </u>	· · · · · · / <u>/ / / / / / / / / / / / /</u>		
Address: _	. W7458 Hillendale Pkwy	. Beaver	Dam, WI	53916		· · ·
NOTE: 11	f necessary, you may attach an addendum to the	ung		·		
	(Signature of Chairman, Vice Chairman	, or any officer!	isted in number	12 of the ap	plication	
14	Edward E. DeTUngg (Typed or printed name and can	V.PFi		ion)	· · · · · · · · · · · · · · · · · · ·	<del></del>

DOM. 180 181 185

#### United States of America

#### State of Wisconsin



### DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Present Shall Come, Greeting:

I, RAY ALLEN, Deputy Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions do hereby certify that

#### KARAVAN TRAILERS, INC.

is a domestic corporation organized under the laws of this state and that its date of incorporation is AUGUST 7, 1986.

I further certify that said corporation has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921 or 181.1622, Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on September 9, 2003.

RAY ALLEN, Deputy Administrator Division of Corporate & Consumer Services Department of Financial Institutions

BY: Patricia Weber

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.