Florida Department of State

Division of Corporations
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To:

Division of Corporations

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Account Name : NRAI CORPORATE SERVICES, INC.

Account Number : I20080000023 Phone : (651)225-9500 Fax Number : (651)225-9579

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FOREIGN PROFIT/NONPROFIT CORPORATION Muncie Reclamation and Supply Company

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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.

(Enter name of c	amation and Supply Company corporation; must include "INCORPORAT corp," "Tine," "Co," or "Corp.")	ED	" "COMPANY," "CORPORATION,"	·	
,	, , , , , , , , , , , , , , , , , , , ,				
(If name unavail	able in Plorida, enter alternate corporate na	กทาง	adopted for the purpose of transacting business in F	lorida)	
2, Missouri	1	3.	36-3648851		
	under the law of which it is incorporated)	_ ~ •	(FBI number, if applicable)		
4, 6/8/89		5.	Perpetual		
(Date	of incorporation)	,	(Duration: Year corp, will cease to exist or "perp	ctual")	
6					
			n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
2720 South	•		- · · · · · · · · · · · · · · · · · · ·		
7. <u>3720 Souti</u>	n Madison Street, Muncie, It (Principal office				
1506 30th	Street NW, Faribault, MN		•	omana?	
(Current mailing address)				2012	
	•		•	Andrew Control	٥
	rts to the motorcoach and t			<u> </u>	= 2€
(Purpose(s	s) of corporation authorized in home state of	or c	nuntry to be carried out in state of Florida)	m m m	012 JUN - I AM IO:
9. Name and street	et address of Plorida registered agent:). ()	D. Box <u>NOT</u> acceptable)	* * * * * * * * * * * * * * * * * * *	¥
Name:	NRAI Services, Inc.				
Office Address:	515 E. Park Avenue				09
	Talahassee		, Florida 32301 (Zip code)		
	(City)		(Zip code)		
Having been nam designated in this further agree to c	application, I hereby accept the appo	inti les i v po	ice of process for the above stated corporation nent as registered agent and agree to act in thi elative to the proper and complete performanc sition as registered agent.	is capac	ity. I
	(Registered agent's signal	ure)	Pacfie Bany, ASS+ Se	ر^	
ti Adda Alendica			not more than 90 days prior to delivery of this		ion 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: _ Address: _ Vice Chalman: Address: Direction Dane Cornell Address: 17469 West Colonial Drive Winter Garden, FL 84787 Director Timothy Wayland Address: 1506 30th Street NW Faribault, MN 55021. B. OFFICERS Prosident: Dane Cornell Address: 17469 West Colonial Drive Winter Garden, FL 34787 Vice President; Shaun-Huxford Address: 3720 South Madison Street Munole, IN 47302 Secretary: Becky Huff (Asst. Secretary) Address: 3720 South Madison Street, Muncle, IN Trousurer: Dan Axelson Address: 1506 30th Street NW, Farlbault, MN 55021 NOTE: If necessary, you may attach an addendum to the application listing additional officers end/or directors. Signaturé of Director or Officer Signaturé of Director or Officer

The officer or director signifig this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aways that false information submitted in a document to the Department of State constitutes a third degree follows as provided for in s.817.155, F.S. 14. Becky Huff, Assistant Secretary and Contract Manager

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

STATE OF MISSOURI



Robin Carnahan Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

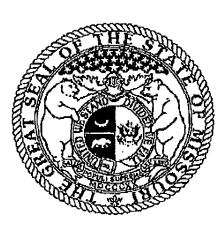
I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and oustody reveal that

> MUNCIE RECLAMATION AND SUPPLY COMPANY 00328950

was created under the laws of this State on the 8th day of June, 1989, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 25th day of May, 2012

Secretary of State



Cortification Number: 14703920-1 Reference: Verify this certificate online at https://www.sos.mo.gov/businessentity/acskb/verify.asp