# Fa00004756

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OCT 27 200 T. LEMBEUX

## COVER LETTER: ;

_	istration Section ision of Corporations			
SUBJECT	: HEARTLAND VIDEO SYST	TEMS INC		
			- must include suffix	
Dear Sir or l	Madam:			
"Certificate	d "Application by Foreign Co of Existence," or "Certificate need foreign corporation to tr	of Good Star	iding" and check are sub	nct Business in Florida," omitted to register the
Please return	n all correspondence concerni	ng this matte	r to the following:	
LINDA HAN	IEY			
		Name of	Person	
HEARTLAN	D VIDEO SYSTEMS INC			
		Firm/Con	npany	
1311 PILGR	IM ROAD			
	- 1	Addr	ess	
PLYMOUTF	I, WI 53073			
		City/State a	and Zip code	<del></del>
lhaney@hvs-				
	E-mail address	: (to be used	for future annual report	notification)
For further i	nformation concerning this m	atter, please	call;	
Linda Haney		920 at (	920 \ 893-6749	
Nar	ne of Person	Area Cod	le Daytime Telep	shone Number
Reg Divi The 241:	REET/COURIER ADDRESS istration Section sion of Corporations Centre of Tallahassee 5 N. Monroe Street, Suite 810 ahassee, FL 32303		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section forporations 7
	a check for the following amo sheck payable to: FLORIDA DE ling Fee \$78.75 Filing Certificate o	PARTMENT g Fee &	OF STATE  3 \$78.75 Filing Fee & Certified Copy	<ul> <li>\$87.50 Filing Fee,</li> <li>Certificate of Status &amp;</li> <li>Certified Copy</li> </ul>



October 8, 2020

LINDA HANEY 1311 PILGRAM RD PLYMOUTH, WI 53073

SUBJECT: HEARTLAND VIDEO SYSTEMS INC

Ref. Number: W20000115585

We have received your document for HEARTLAND VIDEO SYSTEMS INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 720A00019699

RECEIVED OCT 2 3 2020

# 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. HEARTLAND	VIDEO SYSTEMS INC			
(Enter name of c	corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp.")	," _"COMPANY," "CORPORATIO	N,"	
(If name unavail	lable in Florida, enter alternate corporate name	adopted for the purpose of transacting	ng business in Florida)	
2. WISCONSIN	2	39-1917289		
	ry under the law of which it is incorporated)	(FEI number, if applicable)		
4 12-18-1997	5.			
(Date	of incorporation)	(Date of duration, if other	than perpetual)	
6.				
	(Date first transacted business (SEE SECTIONS 607.1501 & 607.1	in Florida, if prior to registration) 502, F.S., to determine penalty liabil	ity)	
7. <sup>1311</sup> PILGRIM I	ROAD, PLYMOUTH, WI 53073			
	(Principal of	fice street address)		
			•	
	(Current maili	ng address, if different)		
0.31			花点 語	
8. Name and stre	et address of Florida registered agent: (P.	O. Box <u>NOT</u> acceptable)		
Name:	CORPORATION SERVICE COMPANY			
Office Address:	1201 Hays St			
	TALLAHASSEE	, Florida	75	
	(City)	(Zip code)	A. C.	
Having been nam designated in this further agree to c	ent's acceptance: sed as registered agent and to accept serve application, I hereby accept the appoints omply with the provisions of all statutes is with and accept the obligations of my positions.	ment as registered agent and agre relative to the proper and complet	ee to act in this capacity. I	
	(Registered agent's s	ignature)	<del></del>	

10. 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.

A. DIRECTORS				
□Chairman	Name:	□ Chairman	JODY KLAS Name:	
□Vice Chairman	Address: N3170 BATES ROAD	☐ Vice Chairman		
□Director	CASCADE, WI 53011	□Director	CASCADE, WI 53011	
■ President		☐ President		<u></u>
□Vice President	<u></u>	□Vice President		
□Secretary	☐Treasurer	Secretary		]Treasurer
□Other	Other	□Other		Other
□Chairman □Vice Chairman	Name:	□ Chairman		
		□Director		
□President		□President		
□Vice President		□Vice President		
□Secretary	□Treasurer	☐ Secretary		]Treasurer
□Other	Other	☐ Other		]Other
□Chairman	Name:	DChairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director	<del></del>	
□President		☐ President		
□Vice President		□Vice President		
□ Secretary	☐ Treasurer	☐ Secretary		]Treasurer
Other	[]Other	Other		Other
Important Nosice: individuals may be	Use an attachment to report more than six (6). The attended to the index when filing your Florida Department of Director	ent of State Annual Re	d for reporting purpo eport form.	oses only. Non-indexed
she is aware that ta s.817.155, F.S.	ctor signing this document (and who is listed in numbulse information submitted in a document to the Departure of the Negarine of the Side v	tment of State constitu	uat the facts stated he otes a third degree fe	rein are true and that he or ony as provided for in
13! <i>J&amp;Y</i>	MID MUS TRESTORET	r (		

## United States of America State of Wisconsin

#### DEPARTMENT OF FINANCIAL INSTITUTIONS



Division of Corporate & Consumer Services

To All to Whom These Presents Shall Come, Greeting:

l, Patti Epstein, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

#### HEARTLAND VIDEO SYSTEMS, INC.

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is December 18, 1997.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120 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 October 16, 2020.

PATTI EPSTEIN, Administrator

Division of Corporate and Consumer Services

Department of Financial Institutions

DFI/Corp/33

### To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/verify/

Enter this code: 277973-39B7CC98