

F 97000006397

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: SMC Corporation (Dover, FL facility will be named Safari Svc Ctr  
(Name of corporation - must include suffix)

Dear Sir or Madam:

700002347237--9  
-11/14/97--01045--001  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida",  
"Certificate of Existence", and check are submitted to register the above referenced foreign corporation to  
transact business in Florida.

Please return all correspondence concerning this matter to the following:

John Varner

W97-25788

(Name of Person)

SMC Corporation

(Firm/Company)

P.O. Box 740

(Address)

Harrisburg, OR 97446

(City/State/Zip)

W/L  
12/4

Should you need to call someone concerning this matter, please call:

John Varner

at ( 541 ) 995-1102

(Name of Person)

(Area Code & Daytime Telephone Number)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
97 DEC - 4 PM 3:55

COURIER ADDRESS:

Qualification/Tax Lien Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

November 14, 1997

JOHN VARNER  
SMC CORPORATION  
PO BOX 740  
HARRISBURG, OR 97446

SUBJECT: SMC CORPORATION  
Ref. Number: W97000025788

We have received your document for SMC CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

You may wish to call the number below to do a preliminary check on whatever name you wish to adopt for use in Florida.

Please list the street address of each officer/director. If the officer/director does not have a street address, list a P.O. Box and write (N/A) beside the box number.

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) 487-6958.

Lee Rivers  
Document Examiner

Letter Number: 497A00054819



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

November 21, 1997

SAFARI MOTOR COACHES, INC.  
ATTN: JOHN VARNER, SMC CORPORATION  
PO BOX 740  
HARRISBURG, OR 97446

We have received your document for SAFARI MOTOR COACHES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We returned your original application on November 14, 1997; that application bore original signatures on lines 10 and 13. Please have the agent and the President put original signatures on these two lines.

Please remove the words "(SMC CORPORATION)" from line 1 of your application. As noted in our previous letter, a copy of which is attached, the name listed there must be identical to the name listed in your certificate of existence, a copy of which is also attached.

Please also note that you failed to make the correction requested in the sixth paragraph of our previous letter, concerning the address for director Curt Lawler.

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) 487-6958.

Lee Rivers  
Document Examiner

Letter Number: 797A00055898

**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. Safari Motor Coaches, Inc.  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Oregon 3. 93-117 8766  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/06/86 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Estimated to be 11/30/97  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. P.O. Box 740  
Harrisburg, OR 97446  
(Current mailing address)

8. Service center for motor homes  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

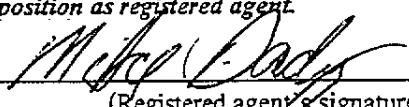

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: Mike Dady

Office Address: 12712 U.S. Highway 92  
Dover, Florida, 33527  
(Zip code)

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 addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
97 DEC -4 PM 3:55



CERTIFICATE

# State of Oregon

OFFICE OF THE SECRETARY OF STATE  
Corporation Division

I, PHIL KEISLING, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:

**SAFARI MOTOR COACHES, INC.**

was  
incorporated  
under the Oregon  
**Business Corporation Act**  
on  
**June 22, 1995**

and is active on the records of the Corporation Division as  
of the date of this certificate.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
97 DEC -4 PM 3:55

In Testimony Whereof, I have hereunto set  
my hand and affixed hereto the Seal of the  
State of Oregon.

PHIL KEISLING, Secretary of State



By Debra L. Virag  
Debra L. Virag  
November 18, 1997