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(Red	questor's Name)			
(Add	dress)			
(Add	Iress)			
(City	//State/Zip/Phone #)			
PICK-UP	WAIT	MAIL .		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to Filing Officer:				
		LS		





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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER

	stration Section sion of Corporations			
SUBJECT:				
	(Name of Limited Liability Company)			
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.				
Please return	all correspondence concerning this matter to the following:			
	TODD WOELFER			
	(Name of Person)			
	COACHMEN INDUSTRIES INC 6 0			
	(Firm/Company)			
	PO BOX 3300 2831 DEXTER DRIVE (Address)			
ELKHART, INDIANA 46515 (City/State and Zip Code)				
For further in	formation concerning this matter, please call:			
	TODD WOELFER at (574) 262-0123 (Name of Person) (Area Code & Daytime Telephone Number)			
	LING ADDRESS: STREET ADDRESS:			
	ion of Corporations Division of Corporations Box 6327 Clifton Building			
	hassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a	check for the following amount: 5.00 Filing Fee \$\sum \$\sum \text{\$\sum \text{\$\sim \text{\$\sin \text{\$\sim \text{\$\sin			

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF FLORIDA:

VIKING RECREATIONAL VEHICL (Name of Foreign Limited Liability Company; mu	F.S., L.I.C. ust include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for th consent of the managers or managing members adopting Company," "L.L.C.," "LLC.")	e purpose of transacting business in Florida and attach a copy of the written the alternate name. The alternate name must include "Limited Liability
MICHIGAN (Jurisdiction under the law of which foreign limited lie company is organized)	3. 58-2586126 (FEI number, if applicable)
4. 12-15-2000 (Date of Organization)	5. N/A (Duration: Year limited liability company will cease to exist or "perpetual")
6. <u>8-23-07</u> (Date first transacted busines (See sections 608.501 & 608.5	ss in Florida, if prior to registration.) 502 F.S. to determine penalty liability)
7. 580 W BURR OAK STREET PO	BOX 549
CENTREVILLE, MICHIGAN 490 (Street A	032 Address of Principal Office)
8. If limited liability company is a manager-ma	naged company, check here X
9. The name and usual business addresses of the	e managing members or managers are as follows:
ARTHUR G. WARLICK	580 W BURR OAK ST CENTREVILLE, MICHIGAN 49032
JEFF TRYKA	2831 DEXTER DRIVE ELKHART, IN 46515
GARY NEAR	2831 DEXTER DRIVE ELKHART, IN 46515
,	han 90 days old, duly authenticated by the official having custody of records in notocopy is not acceptable. If the certificate is in a foreign language, a be submitted.) Sales of RV units in the state of
11. Nature of business or purposes to be conduc	eted or promoted in Florida: Michigan to RV dealers located in
SALE OF RECREATIONAL VEHI	the state of Florida. ICLES TO FLORIDA DEALERS
Pallin	AUU AUU
	an authorized representative of a member.
an affirmation under the penalties	and a state of the first section of the state of the stat
GARY DUNCA	AN Sprinted name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:	
VIKING RECREATIONAL VEHICLES, LLC	_
If name unavailable, the alternate name to be used in the state of Florida is:	_
2. The name and the Florida street address of the registered agent and office are:	•
CSC-LAWYERS INCORPORATING SERVICE (Name)	
1201 HAYS STREET Florida Street Address (P.O. Box NOT ACCEPTABLE)	
TALLAHASSEE FL 32301 City/State/Zip	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Amanda Roath As its agent

· \$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

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SECRETARY OF STATE



Lansing, Michigan

This is to Certify That

VIKING RECREATIONAL VEHICLES, LLC

was validly organized on December 15, 2000 as a Limited Liability Company Said Limited
Liability Company is validly in existence under the laws of this state and has satisfied its annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by Facsimile Transmission 929446

In testimony whereof, I have hereunto set my hand? in the City of Lansing, this 23rd day of August, 2007.

Bureau of Commercial Services

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