# F-97888005231

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificate	s of Status				
Special Instructions to Filing Officer:						
		<b>:</b>				
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### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 27, 2007

DENNETTE BOSWELL P. O. BOX 40 TOPEKA, IN 46571

SUBJECT: DS CORP DBA CROSSROADS RV

Ref. Number: W07000047956



We have received your document for DS CORP DBA CROSSROADS RV and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

#### Adding "of Florida" or "Florida" to the end of a name is not acceptable. State in Horida is

Entities may file using only the entity's name. Please delete any reference to the doing business as name in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

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 the corrected original and one copy of 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) 245-6995.

Wanda Cunningham Document Specialist

Letter Number: 707A00056766

#### **COVER LETTER**

ROTOCT 22 A 11: 15
SECRETARY OF STATE
ORIGINAL **New Filing Section** Division of Corporations SUBJECT: DS Corp dba Crossroads RV (Name of corporation - must include suffix) Dear Sir or Madam: 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: Dennette Boswell (Name of Person) Crossroads RV (Firm/Company) PO Box 40 (Address) Topeka, IN 46571 (City/State and Zip code) For further information concerning this matter, please call: at (\_260 ) 593-3850 Dennette Boswell (Area Code & Daytime Telephone Number) (Name of Person) MAILING ADDRESS: STREET/COURIER ADDRESS: **New Filing Section New Filing Section Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301 Enclosed is a check for the following amount: **▼** \$87.50 Filing Fee, \$78.75 Filing Fee & \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy

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

N COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO A REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. DS Corp

1.	na coib					•		
	(Enter name of co	rporation; must include "INCORPORATE	D,	" "COMPANY," "CORPORATION,"		****	-	
	"Inc.," "Co.," "Co	orp," "Inc," "Co," or "Corp.")						
	10000	. a a la . a . a . a . a						
	Crossr	OACO RV LAC.					_	
	(If name unavaila	ible in Florida, enter alternate corporate nam	ne	adopted for the purpose of transacting bus.	iness in I	Plorida)		
2.	Indiana		3.	35-2121704				
(	(State or country i	under the law of which it is incorporated)		(FEI number, if applicable	<u></u>			
4.	11/1/2004	,	5.	"perpetual"				
•	(Date	of incorporation)	٥.	(Duration: Year corp. will cease to exist	or "perp	etual")	•	
б.								
•		(Date first transacted business	5 Ī	n Florida, if prior to registration)			•	
		(SEE SECTIONS 607.1501 & 607	.1:	502, F.S., to determine penalty liability)				
7	305 Hawpa	atch Topeka, IN 46571						
(Principal office address)								
	PO Box 40	Topeka, IN 46571						
-		(Current mailing a	ıdd	ress)	PS	70	•	
					CR CR	2001 OCT	Comp	
8.	manufactu	rer of recreational vehicles	3		HE-	<u> </u>	_	
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)								
9.	O. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)							
	Name:	CT Corporation System		•	101 115	=		
	Manie.			•				
Of	fice Address:	1200 South Pine Island R	O	ad_	<b>&gt;</b>	S		
	•	Plantation		, Florida 33324				
		(City)		(Zip code)				
		* A**		* * * '				

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)

Kimberly Breunling
Assistant Secretary

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:	À
A. DIRECTORS	700
Chairman:	Se William Co
Address:	ALICAETA 22
•	ASSE OF 11:11
Vice Chairman:	770,42
Address:	~ <b>~</b>
Director:	
Address:	
Director:	
Address:	
B. OFFICERS  President: Wade F. B. Thompson	
4 East 66th St	
New York, NY 10021	
Vice President: Peter B. Orthwein	-
Address: 154 Guards Rd	
Conyers Farm Greenwich, CT 06831	
Secretary:	
Address:	
Treasurer: Dennette Boswell	
Address: 305 Hawpatch Topeka, IN 46571	
NOTE: If necessary, you may attach an addendum to the application listi	ng additional officers and/or directors.
(Signature of Director or Officer listed in number 1	2 of the application)
14. Dennette C. Boswell, VP of Fr.	nance
(Typed or printed name and capacity of person significant signific	gning application)

# STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE



To Whom These Presents Come, Greetings:

I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

#### DS CORP.

duly filed the requisite documents to commence business activities under the laws of State of Indiana on October 26, 2000, and was in existence or authorized to transact business in the State of Indiana on October 05, 2007.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Fifth Day of October, 2007.

TODD ROKITA, Secretary of State

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