

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

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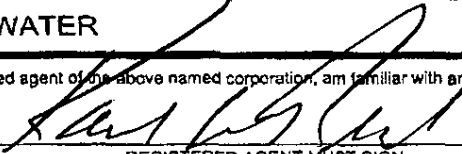
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 839877			
1. Corporation Name THE BRAUN CORPORATION OF INDIANA			
2. Principal Office Address 631 WEST 11TH STREET		3. Mailing Office Address 631 WEST 11TH STREET	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State WINAMAC, IN		City & State WINAMAC, IN	
Zip 46996	Country PULASKI	Zip 46996	Country PULASKI

4. Date Incorporated or Qualified To Do Business in Florida	
5. FEI Number 35-1282638	Applied For ☐ Not Applicable ☐
6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent	
Name BECK, KARL	200023670252
Street Address (P.O. Box Number is Not Acceptable) 5072 113TH AVENUE NORTH	
Suite, Apt. #, Etc.	
City CLEARWATER	State FL Zip Code 33760

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.	
Signature of Registered Agent 	Date 09/24/03
REGISTERED AGENT MUST SIGN	

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
CEO	RALPH W BRAUN	631 WEST 11TH STREET	WINAMAC, IN 46996
D/P	WILLIAM R ROTH	631 WEST 11TH STREET	WINAMAC, IN 46996
D/V	LARRY LARKIN	631 WEST 11TH STREET	WINAMAC, IN 46996
D/S	BRAD JOHNSTON	631 WEST 11TH STREET	WINAMAC, IN 46996

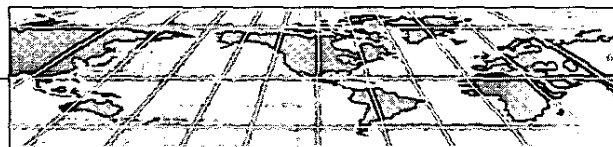
10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.	
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date 09/24/03 Daytime Phone # (574) 946-4139

JR 10/10

Southeastern Division Office:
The Braun Corporation
5072 113th Avenue North
Clearwater, FL 33760 USA
(727) 573-2737
FAX: (727) 573-5069

www.braunlift.com

 **THE BRAUN CORPORATION.**
"Providing Access to the World"



International Corporate Headquarters:
The Braun Corporation
P.O. Box 310
Winamac, IN 46996 USA
1-800-THE LIFT
(574) 946-6153
FAX: (574) 946-4670

September 30, 2003

State of Florida
Department of State
Division of Corporations
Corporation Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314
850 245-6059

RE: Document #839877 Reinstatement of The Braun Corporation of Indiana.

To Whom It May Concern:

We wish to be reinstated as an out-of-state corporation doing business in the State of Florida.

We did not receive renewal notices or late notices at our corporate headquarters in Indiana or at our Florida address. After talking with several employees of the Division of Corporations, we were told that the mailings were returned by the postal service.

Because the corporate dissolution was caused by a third party, we would appreciate a waiver of the reinstatement fee of \$600.00.

Attached is a check for \$150.00.

Sincerely,

Karl W. Beck
Florida Division
The Braun Corporation

CC: Brad Johnston, Corporate Secretary and Counsel