

FOOOOOOO4283 5.

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: Ryan Incorporated Central
(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: 500003335795--0

Vicky Rosinski, Corporate Legal Assistant
(Name of Person)

-07/25/00-01093--003
*****70.00 *****70.00

Brennan, Steil, Basting & MacDougall, S.C.
(Firm/Company)

One E. Milwaukee St., P.O. Box 1148
(Address)

Janesville, WI 53547-1148
(City/State/Zip)

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

Vicky Rosinski at (608) 756-4141
(Name of Person) (Area Code & Daytime Telephone Number)

STREET 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

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Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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. Ryan Incorporated Central
(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. Wisconsin
(State or country under the law of which it is incorporated)
3. 39-1512084
(FEI number, if applicable)
4. March 27, 1985
(Date of incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. No business transacted.
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 2700 East Racine Street, P.O. Box 206
Janesville, WI 53547-0206
(Current mailing address)
8. To engage in any lawful activity within the purposes for which a corporation may be
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) organized.
9. **Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)**
Name: CT Corporation System
Office Address: 1200 S. Pine Island Rd.
Plantation, Florida, 33324
(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) **Francis P. Hogan**
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 addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: SEE ATTACHED LIST

Address: _____

Vice Chairman: NO VICE CHAIRMAN

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: SEE ATTACHED LIST

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. X Patrick W. Ryan PRES

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Patrick W. Ryan, President Patrick W. Ryan PRES

(Typed or printed name and capacity of person signing application)

FILED
JUL 25 11 10 AM
CLERK OF SUPERIOR COURT
JANUARY 10 2014

RYAN INCORPORATED CENTRAL

OFFICERS:

President
Executive Vice President
Vice President
Secretary
Assistant Secretary
Treasurer

Patrick W. Ryan
Matthew J. Ryan
David P. Ryan
James W. Ryan
Richard G. Vorpahl
Nancy C. Ryan

Address: 2700 E. Racine St.
Janesville, WI 53547

DIRECTORS:

Patrick W. Ryan
Matthew J. Ryan
David P. Ryan
James W. Ryan
Nancy C. Ryan

Address: 2700 E. Racine St.
Janesville, WI 53547

RECEIVED
JUL 25 1977
FALLS CHURCH, VA

DOM
180 181 185

United States of America
State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions, do hereby certify that

RYAN INCORPORATED CENTRAL

is a domestic corporation organized under the laws of this state and that its date of incorporation is March 27, 1985.

I further certify that said corporation has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921 or 181.1622, 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 30 Jun 2000.

A handwritten signature in black ink, appearing to read "Ray Allen".

RAY ALLEN, Administrator
Division of Corporate & Consumer Services
Department of Financial Institutions

BY:

A handwritten signature in black ink, appearing to be a stylized "R" or "P".

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.