

CT CORPORATION

F02000000959

CORPORATION(S) NAME

Alamo Sales Corp.

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FILED
02 FEB 22 PM 2:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



RECEIVED
02 FEB 22 PM 12:45
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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| <input checked="" type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| <input checked="" type="checkbox"/> Foreign | <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Other |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Change of RA |
| <input type="checkbox"/> LLC | <input type="checkbox"/> Name Registration | <input type="checkbox"/> UCC |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Fictitious Name | <input checked="" type="checkbox"/> CUS |
| | <input type="checkbox"/> Photocopies | |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

Name _____
Availability _____
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Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

2/22/02

Order#: 5138716

600004991596--4

-02/22/02--01053--020

Ref#: *****70.00 *****70.00

600004991596--4

-02/22/02--01053--024

Amount: \$ *****8.75 *****8.75

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

BK

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.

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1. ALAMO SALES CORP.
(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. DELAWARE 3. 74-2494182
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. NOVEMBER 29, 1989 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUALIFICATION
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. c/o ALAMO GROUP, ATTN: TAX DEPT, 1502 E. WALNUT STREET, SEGUIN, TX 78155

(Current mailing address)

- To engage in any lawful act or activity*
8. for which corporations may be formed in the State of Delaware and permitted under the laws of the State of Florida.
(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: C T Corporation System

Office Address: 1200 South Pine Island Road

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.

C T Corporation System

Howard L. Volz

(Registered Agent's signature)

Howard L. Volz
Asst. 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: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: ROBERT H. GEORGE

Address: 1502 E. WALNUT STREET

SEGUIN, TX 78155

Director: RICHARD J. WEHRLE

Address: 1502 E. WALNUT STREET

SEGUIN, TX 78155

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

President: RONALD A. ROBINSON

Address: 1502 E. WALNUT STREET

SEGUIN, TX 78155

Vice President: IAN BURDEN

Address: 1502 E. WALNUT STREET

SEGUIN, TX 78155

Secretary: ROBERT H. GEORGE

Address: 1502 E. WALNUT STREET

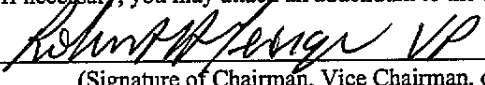
SEGUIN, TX 78155

Treasurer: ROBERT H. GEORGE

Address: 1502 E. WALNUT STREET

SEGUIN, TX 78155

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

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

14. ROBERT H. GEORGE, VICE-PRESIDENT, SECRETARY & TREASURER
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

Delaware

PAGE 1

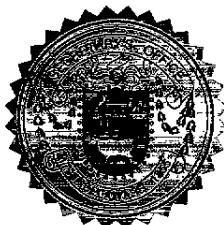
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ALAMO SALES CORP." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF FEBRUARY, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

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02 FEB 22 PM 2:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

2214830 8300

AUTHENTICATION: 1622842

020112222

DATE: 02-20-02