

CT CORPORATION

FO2000001884

CORPORATION(S) NAME

Carrier Commercial Refrigeration, Inc.

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02 APR 16 PM 2:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | | |
| <input checked="" type="checkbox"/> Foreign | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| | <input type="checkbox"/> Reinstatement | |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> LLC | <input type="checkbox"/> Name Registration | <input type="checkbox"/> Change of RA |
| | <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> UCC |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Photocopies | <input type="checkbox"/> CUS |
| <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 | | |

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

4/16/02

Order#: 5188411

Ref#:

lf

100005282071--8

-04/16/02--01037--003

Amount: \$ *****70.00 *****70.00

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

A CCH LEGAL INFORMATION SERVICES COMPANY

**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. Carrier Commercial Refrigeration, Inc.
(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. 38-3002239
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 07/17/1991 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qual
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 1329 Lake Street, Niles, MI 49120
(Principal office address)
- same
(Current mailing address)
8. Commercial Refrigeration Sales and Service
(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
(City) (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.

By: KA. S. C T Corporation System
Kevin A. Seburnia, Asst. Secretary
(Registered agent's signature)

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.

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LED

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

SEE ATTACHMENT

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Robert E. Galli

Address: One Carrier Place

Farmington, CT 06034

Director: Jeffrey Rhodenbaugh

Address: 1245 Corporate Blvd.

Aurora, IL 60504

B. OFFICERS

SEE ATTACHMENT

President: Jeffrey Rhodenbaugh

Address: 1245 Corporate Blvd.

Aurora, IL 60504

Vice President: Mark Anderson

Address: 1245 Corporate Blvd.

Aurora, IL 60504

Secretary: Robert E. Galli

Address: One Carrier Place Farmington, CT 06034

Treasurer: Christopher Witzky

Address: United Technologies Building Hartford, CT 06101

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

13. 

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

14. Jeffrey Rhodenbaugh, President

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

Attachment to Florida
 Application By Foreign Corporation for Authorization to Transact Business In Florida
Officers & Directors

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1. Full Name: Mark Anderson
 Officer/Director: Officer
 Officer's Title: Vice President
 Business Address: 1245 Corporate Blvd.
 City: Aurora
 State: IL
 ZIP Code: 60504
2. Full Name: Christopher J Brogran
 Officer/Director: Officer
 Officer's Title: Assistant Secretary
 Business Address: One Carrier Place
 City: Farmington
 State: CT
 ZIP Code: 06034
3. Full Name: John Conte
 Officer/Director: Officer
 Officer's Title: Assistant Treasurer
 Business Address: United Technologies Building
 City: Hartford
 State: CT
 ZIP Code: 06101
4. Full Name: Edward Gailing
 Officer/Director: Officer
 Officer's Title: Assistant Secretary
 Business Address: United Technologies Building
 City: Hartford
 State: CT
 ZIP Code: 06101
5. Full Name: Robert E. Galli
 Officer/Director: Officer, Director
 Officer's Title: Secretary
 Director's Title: Other Director
 Business Address: One Carrier Place
 City: Farmington
 State: CT
 ZIP Code: 06034
6. Full Name: William H. Habelt
 Officer/Director: Officer
 Officer's Title: Assistant Secretary
 Business Address: Carrier Parkway, Bldg. A&R
 City: Syracuse
 State: NY

- ZIP Code: 13221
7. Full Name: Brian Hagues
 Officer/Director: Officer
 Officer's Title: Assistant Treasurer
 Business Address: 1329 Lake Street
 City: Niles
 State: MI
 ZIP Code: 49120
8. Full Name: Robert Hill
 Officer/Director: Officer
 Officer's Title: Assistant Treasurer
 Business Address: Carrier Parkway, Bldg. TR-5
 City: Syracuse
 State: NY
 ZIP Code: 13221
9. Full Name: Brian Lindroth
 Officer/Director: Officer
 Officer's Title: Controller
 Business Address: One Carrier Place
 City: Farmington
 State: CT
 ZIP Code: 06034
10. Full Name: Gary Pukatch
 Officer/Director: Officer
 Officer's Title: Assistant Controller
 Business Address: One Carrier Place
 City: Farmington
 State: CT
 ZIP Code: 06034
11. Full Name: Andrea Quercia
 Officer/Director: Officer
 Officer's Title: Assistant Secretary
 Business Address: One Carrier Place
 City: Farmington
 State: CT
 ZIP Code: 06034
12. Full Name: Jeffrey Rhodenbaugh
 Officer/Director: Officer, Director
 Officer's Title: President
 Director's Title: Other Director
 Business Address: 1245 Corporate Blvd.
 City: Aurora
 State: IL
 ZIP Code: 60504

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13. Full Name: Kevin T. Williams
Officer/Director: Officer
Officer's Title: Assistant Secretary
Business Address: Carrier parkway, Bldg. TR-20
City: Syracuse
State: NY
ZIP Code: 13221
14. Full Name: Christopher Witzky
Officer/Director: Officer
Officer's Title: Treasurer
Business Address: United Technologies Building
City: Hartford
State: CT
ZIP Code: 06101
15. Full Name: Robert Shaffer
Officer/Director: Director
Director's Title: Other Director
Business Address: 1245 Corporate Blvd.
City: Aurora
State: IL
ZIP Code: 60504

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Delaware

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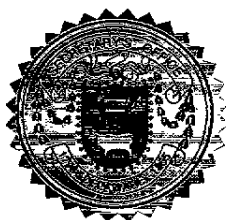
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CARRIER COMMERCIAL REFRIGERATION, INC." 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 FIFTH DAY OF APRIL, A.D. 2002.

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

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

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TALLAHASSEE, FLORIDA



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Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 1704611

DATE: 04-05-02