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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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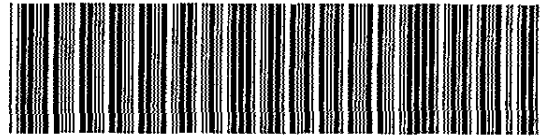
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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CLERK OF SUPERIOR COURT  
TALLAHASSEE, FLORIDA

J. BRYAN III 29 2003

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CUSTOM EQUIPMENT GROUP, INC.  
(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:

KENNETH G. STENZEL, E.A.  
(Name of Person)

STENZEL & COMPANY, INC.  
(Firm/Company)

8695 COLLEGE PARKWAY  
(Address)

FORT MYERS, FL 33919  
(City/State and Zip code)

For further information concerning this matter, please call:

KENNETH G. STENZEL, E.A. at ( 239 ) 936 9253  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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. CUSTOM EQUIPMENT GROUP, 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. KANSAS

(State or country under the law of which it is incorporated)

3. 48-1235782

(FEI number, if applicable)

4. 9/01/2000

(Date of incorporation)

5. 2003

(Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION

(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. 1129 S.W. 52ND ST. CAPE CORAL, FL 33914

(Principal office address)

207 MESA DRIVE SMITHVILLE, MO 64089

(Current mailing address)

8. MOTORCYCLE SALES

(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: BROOKS ROBERTSON

Office Address: 1129 S.W. 52ND ST.

CAPE CORAL

(City)

Florida 33914-7091

(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)

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

A. DIRECTORS

Chairman: BROOKS ROBERTSON

Address: 1129 S.W. 52ND ST. CAPE CORAL, FL 33914

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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CORPORATIONS  
TALLAHASSEE, FLORIDA

B. OFFICERS

President: BROOKS ROBERTSON

Address: 1129 S.W. 52ND ST.

CAPE CORAL, FL 33914

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: BROOKS ROBERTSON

Address: 1129 S.W. 52ND ST. CAPE CORAL, FL 33914

Treasurer: BROOKS ROBERTSON

Address: 1129 S.W. 52ND ST. CAPE CORAL, FL 33914

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

13. \_\_\_\_\_

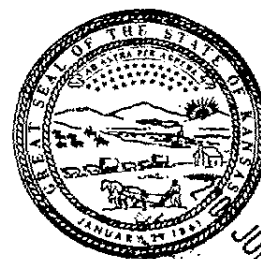
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. BROOKS A. ROBERTSON, PRESIDENT

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

# STATE OF KANSAS

OFFICE OF  
SECRETARY OF STATE  
RON THORNBURGH



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JUL 24 PM 1:53  
ALLAMASSEE, FLORIDA

To all to whom these presents shall come, Greetings:

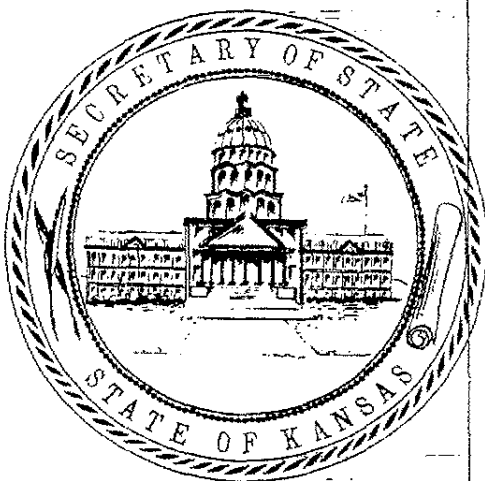
I, RON THORNBURGH, Secretary of State of the state of Kansas, do hereby certify that I am the custodian of records of the State of Kansas relating to corporations and that I am the proper official to execute this certificate.

I FURTHER CERTIFY THAT

CUSTOM EQUIPMENT GROUP, INC.

is a regularly and properly organized corporation under the laws of the state of KANSAS, having been incorporated in Kansas on the 22nd day of September, A.D. 2000 and has paid all fees and franchise taxes due this office and is in good standing according to the records now on file in the office of Secretary of State.

In testimony whereof:  
I hereto set my hand and cause  
to be affixed my official seal.  
Done at the City of Topeka, this  
2nd day of July, A.D. 2003



RON THORNBURGH  
SECRETARY OF STATE