F04000000401

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

100025642831

01/13/04--01007--004 **78.75

LL 01/23/04

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JAN 22 PM 1:09

6p

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Carlson Company Integrated Services, 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:

W04-2029

Julie Cartwright
(Name of Person)

Carlson Company, Inc.
(Firm/Company)

301 W Lincoln Avenue
(Address)

Fall Creek WI 54742
(City/State and Zip code)

04 JAN 22 PM 1:09
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

For further information concerning this matter, please call:

Julie Cartwright at (715) 877-2828
(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

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

January 15, 2004

JAN 2 0 2004

RECEIVED AT
JPSC BRANCH 712

JULIE CARTWRIGHT
CARLSON COMPANY, INC.
301 W. LINCOLN AVENUE
FALL CREEK, WI 54742

SUBJECT: CARLSON COMPANY INTEGRATED SERVICES, INC.
Ref. Number: W04000002029

We have received your document for CARLSON COMPANY INTEGRATED SERVICES, INC. and your check(s) totaling $78.75. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 904A00002839

04 JAN 22 PM 1:09
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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. Carlson Company Integrated Services, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

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

3. 39-1450452
(FEI number, if applicable)

4. August 23, 1983
(Date of incorporation)

5. Perpetual
(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. 301 W Lincoln Avenue, Fall Creek WI 54742
(Principal office address)

PO Box 427, Fall Creek WI 54742
(Current mailing address)

8. Insurance and Investment Sales and Service
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JAN 22 PM 1:09

9. **Name and street address of Florida registered agent:** (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: William D. Carlson

Office Address: 1142 Andrews Street

Englewood (City), Florida 34224 (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.

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

A. DIRECTORS

Chairman: William Carlson

Address: 1142 Andrews Street
Englewood FL 34224

Vice Chairman:

Address:

Director: Julie Cartwright

Address: 1533 Raedel Road
Eau Claire, WI 54703

Director: Susan Carlson

Address: 1142 Andrews Street
Englewood FL 34224

B. OFFICERS

President: William Carlson

Address: 1142 Andrews Street
Englewood FL 34224

Vice President: Julie Cartwright

Address: 1533 Raedel Road
Eau Claire WI 54703

Secretary: Susan Carlson

Address: 1142 Andrews Street, Englewood FL 34224

Treasurer: Susan Carlson

Address: 1142 Andrews STreet, Englewood FL 34224

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JAN 22 PM 1:09

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

13. Julie A Cartwright
(Signature of Director or Officer listed in number 12 of the application)

14. Julie A Cartwright, Vice President
(Typed or printed name and capacity of person signing application)

United States of America
State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services

To All to Whom These Presents Shall Come, Greeting:

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

CARLSON COMPANY INTEGRATED SERVICES, INC.

is a domestic corporation organized under the laws of this state and that its date of incorporation is August 23, 1983.

I further certify that said entity has, within its most recently completed report year, filed an annual report required under section 180.1622, 180.1921, 181.1622, 183.0120 or 185.48 of the Wisconsin Statutes.

I further certify that said company has not filed articles of dissolution with this department.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JAN 22 PM 4:09

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on December 17, 2003.

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

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 of corporate records formerly held by the Secretary of State.

DFI/Corp/33

To Validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/verify/

Enter this code: **997-D474A61D**