

# F04000003558

(Requestor's Name)

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(Document Number)

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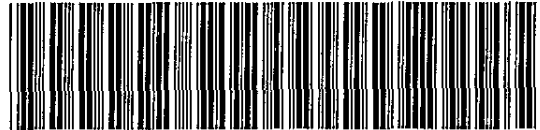
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Acknowledgement

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W. P. Verifier

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2004 JUN 18 P 3:00

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## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Rochester Rotational Molding, 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:

Kathryn Rentschler  
(Name of Person)  
Rochester Rotational Molding, Inc.  
(Firm/Company)  
P.O. Box 205 / 1952 E. Lucas St.  
(Address)  
Rochester, IN 46975  
(City/State and Zip code)

For further information concerning this matter, please call:

Kathryn Rentschler at ( 574 ) 223-8844  
(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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2004 JUN 18 P 3:00  
TALLAHASSEE FL  
SECRETARY OF STATE

**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. Rochester Rotational Molding, 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. Indiana 3. 35-1749289  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 9-16-1988 5. Perpetual  
(Date of incorporation) (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. 1952 E. Lucas St. Rochester, IN 46975  
(Principal office address)

P.O. Box 205 Rochester, IN 46975  
(Current mailing address)

8. Rotational Molding Company  
(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)

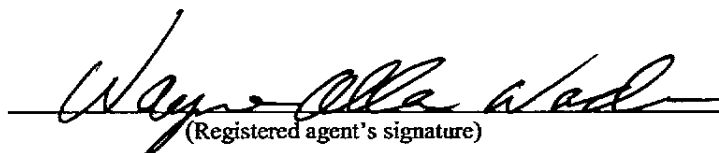
Name: Allen Wade

Office Address: 3130 Reynolds Rd.

Lakeland, Florida 33803  
(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.*

  
(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:

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JUN 18 P 3:00  
TALLAHASSEE  
SECRETARY OF STATE

**A. DIRECTORS**

Chairman: Marilyn Wade  
Address: \_\_\_\_\_

Vice Chairman: Wayne Allen Wade  
Address: \_\_\_\_\_

Director: Marilyn Wade  
Address: \_\_\_\_\_

Director: Wayne Allen Wade  
Address: \_\_\_\_\_

**B. OFFICERS**

President: Marilyn Wade  
Address: 1098 Dogwood Drive  
Rochester, IN 46975

Vice President: Wayne Allen Wade  
Address: 1098 Dogwood Drive  
Rochester, IN 46975

Secretary: Wayne Allen Wade  
Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

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

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

13. *Marilyn S. Wade*  
(Signature of Director or Officer listed in number 12 of the application)

14. \_\_\_\_\_  
(Typed or printed name and capacity of person signing application)

FILED  
JUN 13 P 3:00  
TALLAHASSEE, FL  
SECRETARY OF STATE

**STATE OF INDIANA  
OFFICE OF THE SECRETARY OF STATE  
CERTIFICATE OF EXISTENCE**

To Whom These Presents Come, Greetings:

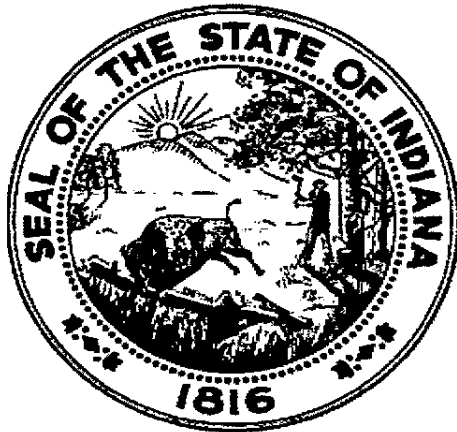
I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

**ROCHESTER ROTATIONAL MOLDING, INC.**

duly filed the requisite documents to commence business activities under the laws of State of Indiana on September 16, 1988, and was in existence or authorized to transact business in the State of Indiana on June 15, 2004.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Fifteenth Day of June, 2004 .

*Todd Rokita*

TODD ROKITA, Secretary of State

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