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(Re	equestor's Name)				
(Ad	ldress)				
(Ad	ldress)				
(Cit	ty/State/Zip/Phone	· #)			
PICK-UP	MAIT	MAIL			
(Bi	ısiness Entity Nam	ne)			
(Do	cument Number)				
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
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J. BRWAN JUL 23 2004

TRANSMITTAL LETTER

TRANSMITTAL LETTER	My JULY PH 3:00				
TO: Registration Section	1350 July 300				
Division of Corporations	100 /ON				
SUBJECT: Techspace, 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 corporatio transact business in Florida.					
Please return all correspondence concerning this matter to the following:					
Keith Wilson					
(Name of Person)					
Techspace, Inc.					
(Firm/Company)					
PO Box 878					
(Address) Monona, IA 52159					
(City/State and Zip code)					
For further information concerning this matter, please call:	•				
Keith Wilson at (563) 539-2336					
(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 & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee & Certificate of Status Certified Copy Certified Copy					

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANO REGISTER A FO	E WITH S DREIGN C	ECTION 607.1503, FLORIDA ORPORATION TO TRANSAC	4 SI CT B	TATUTES, THE FOLLOWING IS SUBMITTED TO SUSINESS IN THE STATE OF FLORIDA. ""COMPANY," "CORPORATION,"
1 Tec	hspace.	Inc.		A. E.
(Enter name of "Inc.," "Co.," "	corporation Corp," "Inc	n; must include "INCORPORAT) "," "Co," or "Corp.")	ED,	"COMPANY," "CORPORATION,"
(If name unava	ilable in Flo	orida, enter alternate corporate na	ıme	adopted for the purpose of transacting business in Florida)
2. <u>Io</u>	a	law of which it is incorporated)	_3.	20-0244129
(State or country	y under the	law of which it is incorporated)		(FEI number, if applicable)
48/1			5.	Perpetual
(Da	te of incorp	oration)		(Duration: Year corp. will cease to exist or "perpetual")
6. Upo	n Quali	fication		,
	acted busin			transacted business in Florida, insert "upon qualification."), 607.1502 and 817.155, F.S.)
7. 203	Oak St	reet, Monona, IA. 521		
700	D 070	(Principal office	addi	ress)
PO	BOX 8/8	, Monona, IA 52159		
		(Current mailing	add	ress)
8Sal	e of mo	dular buildings		
(Purpose	(s) of corpo	oration authorized in home state of	or co	ountry to be carried out in state of Florida)
9. Name and st	reet addre	ess of Florida registered ager	nt:	(P.O. Box or Mail Drop Box NOT acceptable)
Name:	C T Corpo	ration System		
Office Address:	1200 Sout	h Pine Island Road		
		Plantation		, Florida 33324
		(City)		(Zip code)
designated in th further agree to	med as reg is applicat comply w	gistered agent and to accept so ion, I hereby accept the appo	intn es r	ce of process for the above stated corporation at the place nent as registered agent and agree to act in this capacity. I elative to the proper and complete performance of my duties sition as registered agent.
	СТС	orporation System		
	By: / ()	uren seus		Lauren Greco Applicant Secretary
·		(Registered agent's signati	ure)	- —

- 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. DIREC	CTORS	ALLANS SERVICE
Chairman:	William E. Britz, Jr.	अस्ति स्ट
Address:	PO Box 1179	S. Company
	Wheatland, WY 82201	
Vice Chairr	man:	
Address: _		
—	Roger J. Gibbs	John B. Priest
_	1215 1 1/2 Street SW	7425 Chavenelle Road
Address: _	Dyersville, IA 52040	Dubuque, IA 52002
 _ Director: _	Thomas D. George	David Walrath
Address: _	240 Aberdeen Drive	3429 Wyatt Court
	Algonquin, IL 60102	Laramie, WY 82070
Address: _	Wheatland, WY 82201	
Address: _	PO Box 878 Monona, IA 52159	
- Secretary:	J. Keith Wilson	
Address: _	PO Box 878, Monona, IA 52159	
Treasurer:	J. Keith Wilson	
Address: _	PO Box 878, Monona, IA 52159	
NOTE: I	f necessary, you may attach an addendum to the ap	plication listing additional officers and/or directors.
13	Signature of Director or Officer listed in nu	mber 12 of the application)
14	J. Keith Wilson Sec/Treas	
14	(Typed or printed name and capacity	of person signing application)



Date: 07/06/2004

SECRETARY OF STATE

490 DP-000282957 TECHSPACE, INC. TECHSPACE INC L. KAUFMAN PO BOX 878 MONONA, IA 52159

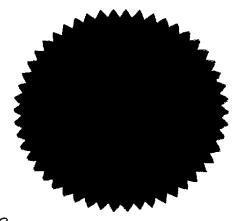
CERTIFICATE OF EXISTENCE

Name: TECHSPACE, INC.

Date of Incorporation: 08/12/2003

Duration: PERPETUAL

I, CHESTER J. CULVER, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify that the corporation named on this certificate is in existence and was duly incorporated under the laws of Iowa on the date printed above, that all fees required by the Iowa Business Corporation Act have been paid by the corporation, that the most recent biennial corporate report has been filed by the Secretary of State, and that articles of dissolution have not been filed.



CHESTER J. CULVER

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SECRETARY OF STATE



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