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TALLAHINGE STATE

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#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Airstream 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:
Mark Wahl
(Name of Person)
Airstream Inc.
(Firm/Company)
419 W. Pike St.
(Address)
Jackson Center, OH 45334
(City/State and Zip code) (City/State and Zip code) (City/State and Zip code)
For further information concerning this matter, please call:
Daniel R. Froehlich at (937/596-6111
(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:
S70.00 Filing Fee XXX \$78.75 Filing Fee & S78.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 7, 2005

MARK WAHL AIRSTREAM INC. 419 W PIKE ST JACKSON CENTER, OH 45334

SUBJECT: AIRSTREAM INC. Ref. Number: W05000006269

We have received your document for AIRSTREAM INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The registered agent must sign accepting the designation.

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 your document, along with 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) 245-6913.

Letter Number: 705A00008447

Diane Cushing Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

#### 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.

(Enter name of cor "Inc" "Co" "Cor	rporation; must inclurp," "Inc," "Co," or '	.ide "INCORPOF "Corp.")	(ATED," "C	COMPAI	IY," "CORPORATI	ON,"		
<b>,</b> ,	<b>,</b>	***						
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If name unavailab	ole in Florida, enter	alternate corpora	te name adoj	pted for t	he purpose of transac	ting business i	n Florida	)
	. Nev	vada	3.					_
State or country ur	nder the law of which	ch it is incorporat	ied)		(FEI number, if a	pplicable)		<del></del>
7/29/8	0	•	5.		Perpetual			-
(Date o	of incorporation)		(D	uration:	Year corp. will cease	e to exist or "pe	erpetual")	_
	2/01/05							
					rior to registration)		-	
	(SEE SECT	IONS 607.1501 6	& 607.1502 <b>,</b>	F.S., to	letermine penalty lial	oility)		
419 W	. Pike St.	Jackson C	enter, C	)H	15334	ALLI SE	2005	
	<del></del> -	(Principal of	fice address	)	-	AH.	MAR	T
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	_	-	ate or counti	ry to be o	arried out in state of	Florida)	~~ ~~	_
(Purpose(s)	_	orized in home st				Florida)	$\overline{\omega}$	_
(Purpose(s)  Name and <u>street</u>	of corporation authorida	orized in home st	nt: (P.O. B			Florida	$\overline{\omega}$	_
(Purpose(s)	of corporation authorized address of Florida CT Corporation	orized in home started ageration Syst	nt: (P.O. B			Florida	<del>-</del>	
(Purpose(s)  Name and <u>street</u> Name:	of corporation authorized address of Florida CT Corporation	orized in home st	nt: (P.O. B			Florida	<del></del>	
(Purpose(s)  Name and <u>street</u>	of corporation authorized address of Florida CT Corporation	orized in home staregistered age ration Syst	nt: (P.O. B	ox <u>NO</u>		Florida	<u> </u>	

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.

Sugar J. Metze
Assistant 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.
- 12. Names and business addresses of officers and/or directors:

A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director	•
Director:	
Address:	ZEC C
B. OFFICERS	AESE
President: Richard Riegel	
Address:	r™to
	To a
Vice President: of Operations - Mark Wahl	~
Address:	
Secretary:	
Address:	
Treasurer: V.P. Finance - Daniel R. Froehlich	
Address:	
	-
NOTE: If necessary, you may attach an addendum to the application listing additional add	onal officers and/or directors.
13. Namel R. Fracklich	
(Signature of Director or Officer listed in number 12 of the a	pplication)
14. <u>Daniel R. Froehlich, V.P. Finance</u>	
(Typed or printed name and capacity of person signing app	olication)

SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, AIRSTREAM, INC., as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since July 29, 1980, and is ingood standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 17, 2005.

office on February 17, 20

Solver Helder

DEAN HELLER

Secretary of State

By

Certification Cler