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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: ABATECO, Inc.
SUBJECT: HBAIECU, LAC. (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:
Jennifer DeWester (Name of Person)
(Name of Leison)
Abateco, Inc.
(Firm/Company)
(Firm/Company) 2366 Bose Place (Address)
(Address)
Roseville, MN 55113
(City/State and Zip code)
For further information concerning this matter, please call:
(Name of Person) (Area Code & Daytime Telephone Number)
Tenni few Dewester at (651) 604-2759 (Name of Person) (Area Code & Daytime Telephone Number) STREET ADDRESS: Registration Section Division of Corporations
STREET ADDRESS: MAILING ADDRESS:
Registration Section Registration Section Division of Corporations Division of Corporations
409 E. Gaines St. P.O. Box 6327
Tallahassee, FL 32399 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 COMPLIANCE WITH SECTION 607.1503, FLORIDA STAT REGISTER A FOREIGN CORPORATION TO TRANSACT BUS	
ABATECO, Inc.	
(Enter name of corporation; must include "INCORPORATED," "Corp.," "Corp.," "Corp.," "Corp.")	COMPANY," "CORPORATION,"
•	
(If name unavailable in Florida, enter alternate corporate name ado	pted for the purpose of transacting business in Florida)
2. Minnesota 3	(FEI number, if applicable)
4. 01/05/2004 5. (Date of incorporation)	Der Det na Duration: Year corp. will cease to exist or "perpetual")
(Date of incorporation) (D	Duration: Year corp. will cease to exist or "perpetual")
6. (Date first transacted business in FI	orida if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502,	F.S., to determine penalty liability)
7. 2366 Rose Place Roseville,	MN 55/13
7. 2366 Rose Place Roseville (Principal office address 2366 Rose Place Roseville (Current mailing address)	MAL EGUS
(Current mailing address)
8. (Purpose(s) of corporation authorized in home state or count	ry to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. B	
	ox <u>nor</u> acceptate)
Name: CT Corporation System	7 Pro 23
Office Address: 1200 South Pine Island R.	
Plantation (City)	10ad CSF SS TSF TSF
• • •	(Zip code)
10. Registered agent's acceptance: Having been named as registered agent and to accept service of	of process for the above stated corporation at the place
designated in this application, I hereby accept the appointmen further agree to comply with the provisions of all statutes relatives	t as registerea agent ana agree to act in this capacity. 1
and I am familiar with and accept the obligations of my position	
1 - 0	
Man En M.C. &	lummer PaVon ant 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:		77
Address:		•
Director: Lee B. Anderson, Sr.		
Address: 3054 Gordon Drive	· 	
Naples, FL 34102		
Director: William M. Beadie		_
Address: 705 Montcalm Place		م وراية
St. Paul, MN 55116		
B. OFFICERS		-· .
President: Phillip K. Havein		• •
Address: 2366 Rose Place.	·	
Roseville, MN 55113	-	
Vice President:		*
Address:	-	
Secretary: William M. Beadie		
Address: 705 Montcalm Place St. Paul, MN 55116	· · ·	-
Treasurer: Loten Rachey		
Address: 2366 Rose Place Boseville, MN 55113		,
NOTE: IC		
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.		
13. (Signature of Director or Officer listed in number 12 of the application)		i i v
14. Phillip Harein President		
(Typed or printed name and capacity of person signing application)	: .	¥

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state of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

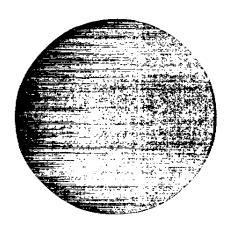
I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: ABATECO, Inc.

Date Formed: 01/05/2004

Chapter Governed By: 302A

This certificate has been issued on 04/05/05.



Mary Hiffmeyer Secretary of State.