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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	······································
(Cit	y/State/Zip/Phone	;#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

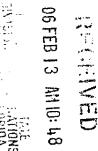
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SECRETARY OF STATE



COI	RPORA	\TE
Ā	CCES	S, /
	INC	/-

"When you need ACCESS to the world"

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (39315-7066) (850) 992-2666 or (800) 969-1666 Fax (850) 992-1666

		P.O. Box 3700	0 (82813-7000)	(830) 222-2000 or (800) 909-1000 . Pax (830) 222-1000
WALK IN				
		PICI	K UP:	2/13/06 Blanda
		CERTIFIED COPY		
		РНОТОСОРУ		
	V	CUS	 	
		FILING	FOR	eign
1.		LOSIAK E (CORPORATE NAME AND DOC	- Glippen en	f Company
2.			•	
		(CORPORATE NAME AND DOC	CUMENT #)	
3.			N 18 (718 (67) (1)	
		(CORPORATE NAME AND DOC	CUMENT #)	
4.		(CORPORATE NAME AND DOC	TETRATISTIC US	
		(CORPORATE NAME AND DOC	SCHMITAN 1 #)	
<i>5</i> .		(CORPORATE NAME AND DOC	TIMENT #)	
6.		(CORPORATE NAME AND DOC	CUMENT #)	
			·	
SPECIAL INSTRUCTIONS:				
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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	nc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	,	COM ANT, COIL ORATION,
			SEC TALL
(If	name unavailable in Florida, enter alternate corporate n	ame	adopted for the purpose of transacting business in Florida)
2	Michigan	_ 3.	<u> 58-235-8441</u> 競 5
(St	ate or country under the law of which it is incorporated)	,	(FEI number, if applicable)
4	11-20-97	_ 5.	
	(Date of incorporation)		(Duration: Year corp. will cease to exist or "perpendia")
6			7
	(Date first transacted busin (SEE SECTIONS 607.1501 & 60	ess in 07.15	n Florida, if prior to registration) 602, F.S., to determine penalty liability)
7	34au NE augarhill (Principal office	A	e Janson Prach, FL 34957
		add.	engen Roman ti 24957
	3-60 NE SUSOYNIII AVE (Current mailing	اب g add	ress)
	0 112 0 1 2	_	
8	GOLF CART SOVING S	\mathfrak{S}_{0}	1es and Kental
	(Purpose(s) of corporation authorized in home state	or co	untry to be carried out in state of Florida)
9. N	ame and street address of Florida registered agent:	(P.C). Box NOT acceptable)
	Name: HOWORD T. RICE		
Offic	re Address: 3480 NE Sugar hill	Ð	xe_
	Jansen Bonn		. Florida 34957
	(City)		(Zip code)

10. Registered agent's acceptance:

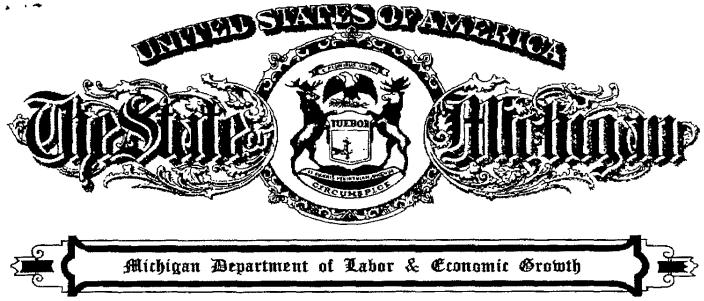
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative 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:

FILED

A. DINECTORES	06 FEB 13 AM 8: 02
Chairman:	SECRETARY OF STATE
Address:	TALLAHASSEE FLORIDA
Vice Chairman:	
Address:	
Director: Donald C. Hayden M	
SES Chanald Page 1	
Travesce City, MI	
Director: Haward T. Rice	
Address: 3480 NE Sugarhill Ave	
Jansen Beach, FL 34957	
B. OFFICERS	
President: Donald C. Haydon, Jr	
Address: 555 Arnold Road	
Traverse City, MI	
	<u></u>
Vice President:	
Address:	
Secretary: Hanard T. Rice	
	2000 TI 2/1087
Address: 3420 NE Sugarhill Ave conson F	TUN FL DID I
Treasurer: DOOOL C. HOUCEN J. T.	. NT
Address: 555 Arnold Road Traverse Cit	Y+1V11
NOTE: If necessary, you may attach an addendum to the application listing a	dditional officers and/or directors
	wallional officers and of discours.
(Signature of Director or Officer listed in number 12 of	the application)
14. Toward T-RICE- S (Typed or printed name and capacity of person signing)	ECRETANY
(Typed or printed name and capacity of person signing	g application)



Lansing, Michigan

This is to Certify That

KODIAK EQUIPMENT COMPANY

was validly incorporated on November 20, 1997, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

06 FEB | 3 AM 8: 02 SECRETARY OF STATE

In testimony whereof, I have hereunto set his hand, in the City of Lansing, this 10th day of February, 2006.

, Director

Bureau of Commercial Services