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(Re	questor's Name)	·
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Midland Builders, 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:
Macy Shubak
(Name of Person)
LaFollette Godfrey & Kahn
(Firm/Company)
P.O. Box 2719
(Address)
Madison, WI 53701-2719
(City/State and Zip code)
For further information concerning this matter, please call:
Macy Shubak at (800) 735-1687
(Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: MAILING ADDRESS:
New Filing Section New Filing Section Division of Corporations Division of Corporations
Clifton Building P.O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301
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 Certificate of Status & Certified Copy

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 corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
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45%
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Wisconsin 3. 39-1031122 Constant 2. 39-1031122
(State or country under the law of which it is incorporated) (FEI number, if applicable)
February 27, 1964 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. April 7, 2006
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
₇ 6801 South Towne Drive, Madison, WI 53713
(Principal office address)
6801 South Towne Drive, Madison, WI 53713
(Current mailing address)
8. Any and all lawful business
(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 NOT acceptable)
Name: Barbara Kiger Same Same Same Same Same Same Same Same
Office Address: 7327 Pine Valley Street
Bradenton , Florida 34202
, 1 Maa
(City) (Zip code)
(City) (Zip code)
(City) (Zip code)
(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
(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.
(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
(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.

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: Gilbert S. Rosenberg Address: 8750 Midnight Pass Rd., Unit 600C Sarasota, FL 34242 Vice Chairman: _____ Address: Director: Lyn Mulder Rosenberg Address: 8750 Midnight Pass Rd., Unit 600C Sarasota, FL 34242 Director: Jeffrey S. Rosenberg Roger D. Peterson Address: 6801 South Towne Drive 6801 Chester Dr., Unit A Madison, WI 53713 Madison, WI 53719 B. OFFICERS President: Jeffrey S. Rosenberg Address: 6801 South Towne Drive Madison, WI 53713 Vice President: 1) Lyn Mulder Rosenberg 2) Roger D. Peterson Address: 8750 Midnight Pass Rd., Unit 600C 6801 Chester Dr., Unit A Madison, WI 53719 Sarasota, FL 34242 Secretary: Roger D. Peterson Address: 6801 Chester Dr., Unit A, Madison, WI 53719 Treasurer: Gilbert S. Rosenberg Address: 8750 Midnight Pass Rd., Unit 600C, Sarasota, FL 34242 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) 14. Röger D. Peterson (Typed or printed name and capacity of person signing application)

United States of America State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services



To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Deputy Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions, do hereby certify that

MIDLAND BUILDERS, INC.

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is February 27, 1964.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that it has not filed articles of dissolution.

IN TESTIMONY WHEREOF, I have h my hand and affixed the official seal of Department on March 23, 2006.

RAY ALLEN, Deputy Administrator Division Of Corporate & Consumer Services Department of Financial Institutions

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Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/verify/

Enter this code:

23899-90AAC4EF