

## Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850)222-1092 Fax Number : (850)878-8926

## FOREIGN PROFIT/NONPROFIT CORPORATION

#### Alfa Leisure, Inc.

Certificate of Status	0
Certified Copy	8
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#### COVER LETTER

SECRETARY OF STATE

		1 1 1 1	TALLAHASSEE, FLORIC
TO: New Filing !	Section	13	
Division of	Corporations		
SUBJECT: Alfa	Leisure, Inc.	. •	
	(Name of con	poration - must include suffic	x)
Dear Sir or Madam:			
The enclosed "Appli- "Certificate of Exists transact business in I	cation by Foreign Corporation nace," and check are submitte Torida.	on for Authorization to Truns ed to register the above refer	sact Business in Florida," enced foreign cosponation to
Please return all core	espandence concerning this	matter to the following:	
Michael S. Kelly	•	-	
	(Na	une of Person)	
Alfa Laisure, Inc.			
	<b>(F</b> t	m/Company)	
3612 S. Cucamonga A	we.		
<del></del>	······································	(Address)	
Ontario, CA 91761		Side Barton Barton	•
	(City/	State and Zip code)	······································
	` `	•	
For further information	on concerning this matter, ple	case call;	
Michael S. Kelly	st (	909 628-5574, ext. 147	
(Name of Pe	rson) (a	909 628-5574, ext. 147 Area Code & Daytime Telep	hone Number)
			•
		•	
	DURIER ADDRESS:	MAILING A	
Division of C	New Filing Section Division of Corporations  New Filing Section Division of Corporations		
Clifton Build		P.O. Box 6327	
	ve Center Circle	Taliahassce,	
Enclosed is a check for	or the following amount:		
\$70.00 Filing Pcc	\$78.75 Filing Fee & Certificate of Status	Certified Copy	\$87.50 Filing Fee, 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.

IAifa I	Leimure, inc.		
(Enter name of co	aporation; must include "INCORPORATED ap," "Inc." "Co," or "Corp.")	," "COMPANY," "CORPORATION,"	
(If vame unavailed	ble in Florida, enter alternate corporate name	adopted for the purpose of transacting busi	ness in Florida)
L. California	3	33-0872514	
(State or ocuminy w	nder the law of which it is incorporated)	(FEI number, if applicable	.)
€. 07-15-1999	5.	* Perpetual	
(Date o	of incorporation)	(Duration: Year corp. will coase to exist	or "perpetual")
5.			
	(Date first transacted business)	in Florida, if prior to registration)	<del></del>
		502, F.S., to determine penalty liability)	
7. 1612 S. Cocar	nonga Ave., Ontorio, CA 91761	s' 11 - 2	,
1612 S. Cwenn	(Principal office add norga Ave., Ontario, CA 91761	) :	
£012 G. CBG2.	(Correst pailing add	(erus)	
	(Cuttern Dresting and	MOEN;	
Manufacturer o	of recreational vehicles.		36 38 38
(Purpose(s)	of corporation authorized in home state or o	ountry to be carried out in state of Plotids)	<u> </u>
3. Name and street	address of Florida registered agent: (P.0	3. Box NOT accentable)	ALLAS ALLAS
	CT Corporation System		SSS 2
Name:			me the
Office Address:	1200 South Pine Island Road	<del></del>	正公 ≥ □
	Plentation	Florida 33324	골을 <del></del>
	(City)	(Zip code)	≫ <sup>™</sup> ω
io. Registered age	,		
	ar s receptance; à as registered agent and to accept servi	ics of process for the above statud corre	ration at the place
lesignateŭ in this a	pplication, I hereby accept the appoints	ment as registered agent and agree to a	et in this capacity. I
iuriner egree to col ned I am familier v	uply with the provisions of all statutes i with and accept the obligations of my po	relitiive to the proper and complete perf- withou as vericlosed opens	ormance of my dutle
	C T Corporation System	Antonicia del californica da differente	
	A Composition System		
Ву	Came Bry	`t	
-	(Régistered agent's signature)		-
	, s.	<del></del> .	

<sup>11.</sup> 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 S					
Chairman:	Johnnie R. Cresn					
Address:	1612 S. Cucemongs Avo.	<u> </u>				
*****	Ontaño, CA 91761					
Vice Chaire	DAI):					
Address: _						
_						
Director.	Lais Nogales					
Address:	1612 S. Cucamongs Ave.					
	Omario, CA 91751	·=,	. 0			
Director:	Andrew Creen		. <b>5</b> 7			
Address: _	1612 S. Cucamongs Ave.	#5	MAY	ئد		
	Ontaria, CA 91761	888	24			
B. OFFIC	PDC	7.,	. ⊋			
President:	Larry Jones		; <del></del>			
Address:	1612 S. Cucamonga Ave.	<b>P</b>	, <u>S</u>			
	Optatio, CA 91761					
Vice Preside	mit Michael Kelly					
Address:	1512 S. Cucamonga Ave.					
	Ontacio, CA 91761					
Secretary:	Catol Smith					
Address: _	1612 S. Cucamonga Ave., Omario, CA 91761			-		
_			-			
Address:						
NOTE: If	necessary, you may attach an addendum to the appl	ication listing additional officers and/or dire	otors.			
13	Micheland					
14.	Vice President	n number 12 of the application)				
( and capacity of porson signing application)						

# State of California Secretary of State

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

### CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, BRUCE McPHERSON, Secretary of State of the State of California, hereby certify:

That on the 15TH day of JULY, 1999, ALFA LEISURE, INC. became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.

'IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of May 23, 2006.



BRUCE McPHERSON