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(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*[Handwritten signature]*  
3/12

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** WESTERN PNEUMATICS, 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:

TRACY L MCCLAIN

(Name of Person)

WESTERN PNEUMATICS, INC.

(Firm/Company)

PO BOX 21340

(Address)

EUGENE, OR 97402

(City/State and Zip code)

For further information concerning this matter, please call:

TRACY L MCCLAIN

(Name of Person)

at ( 541 ) 461-2600

(Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☒ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & 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.*

1. **WESTERN PNEUMATICS, INC.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **OREGON**

(State or country under the law of which it is incorporated)

3. **93-0885198**

(FEI number, if applicable)

4. **04/01/1985**

(Date of incorporation)

5. **PERPETUAL**

(Duration: Year corp. will cease to exist or "perpetual")

6. **APPROX SEPTEMBER 2007**

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **110 NORTH SENECA EUGENE, OR 97402**

(Principal office address)

**PO BOX 21340 EUGENE, OR 97402**

(Current mailing address)

8. **INSTALLATION OF EQUIPMENT MANUFACTURED BY US IN OREGON**

(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: **CT Corporation System**

Office Address: **1200 SOUTH PINT ISLAND RD**

**PLANTATION**

(City)

, Florida **33324**

(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.*

See attached sheet

(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.

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MAR -9 AM 8:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: RICHARD J NICOL

Address: PO BOX 21340  
EUGENE, OR 97402

Vice Chairman: RICHARD F SANDERS

Address: PO BOX 21340  
EUGENE, OR 97402

Director: BRUCE H LIVESAY

Address: PO BOX 21340  
EUGENE, OR 97402

Director: ROBERT R MARSHALL

Address: PO BOX 21340  
EUGENE, OR 97402

**B. OFFICERS**

President: RICHARD J NICOL

Address: PO BOX 21340  
EUGENE, OR 97402

Vice President: RICHARD F SANDERS

Address: PO BOX 21340  
EUGENE, OR 97402


~~Vice Pres~~ ROBERT R MARSHALL

~~Secretary~~ Address: PO BOX 21340 EUGENE, OR 97402

~~Vice Pres~~ BRUCE H LIVESAY

~~Treasurer~~ Address: PO BOX 21340 EUGENE, OR 97402

**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)

14. RICHARD F SANDERS, VICE PRESIDENT  
(Typed or printed name and capacity of person signing application)



a Wolters Kluwer business

CT  
520 Pike Street  
Suite 2610  
Seattle, WA 98101

206 622 4511 tel  
206 621 8813 fax  
[www.ctlegalsolutions.com](http://www.ctlegalsolutions.com)

## FLORIDA

### CONSENT TO SERVE AS REGISTERED AGENT

CT Corporation System having been designated to act as Registered Agent  
Hereby agrees to act in this capacity for the following Corporation: Western  
Pneumatics, Inc.

CT CORPORATION SYSTEM

  
Kathleen C. Gariepy, Asst. Sec.

Date: 3-2-2007

CT Corporation System  
1200 South Pine Island Road  
Plantation, FL 33324

CERTIFICATE

# State of Oregon

OFFICE OF THE SECRETARY OF STATE  
Corporation Division

I, BILL BRADBURY, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:

**WESTERN PNEUMATICS, INC.**

was

incorporated

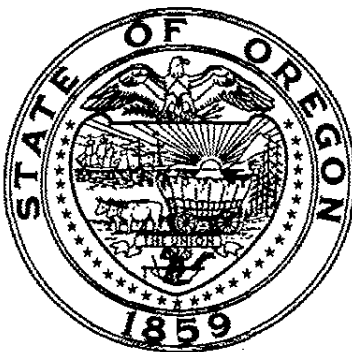
under the Oregon

**Business Corporation Act**

on

**April 1, 1985**

and is active on the records of the Corporation Division as of  
the date of this certificate.



In Testimony Whereof, I have hereunto set  
my hand and affixed hereto the Seal of the  
State of Oregon.

BILL BRADBURY, Secretary of State

By

*Debra L. Virag*

Debra L. Virag

January 24, 2007