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(Re	equestor's Name)				
(Ad	ldress)				
(Ad	ldress)				
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	isiness Entity Nan	ne)			
(Do	cument Number)				
Certified Copies	Certificates	Certificates of Status			
Special Instructions to	Filing Officer:				
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Office Use Only



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²04/24/07-01045-086 **70.75

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SECRETARY OF STATE
TALLAHASSEE. FLORIDA

COVER LETTER

TO: New Filing Division of	Section Corporations		
SUBJECT:	Satellite Shelters, In	ıc.	
		poration - must include suffix	()
Dear Sir or Madam	:	•	
The enclosed "App "Certificate of Exis transact business in	lication by Foreign Corporation tence," and check are submitt Florida.	on for Authorization to Trans ed to register the above refer	eact Business in Florida," enced foreign corporation to
Please return all con	rrespondence concerning this	matter to the following:	
	Christopher Peterson		
	(Natellite Shelters, Inc.	ame of Person)	
2	(Fi	rm/Company)	
N	Ninneapolis, MN 55441	(Address)	
	(City/	State and Zip code)	
	tion concerning this matter, placers on VP	lease call: 763/551-7201	
Chris Pet			
(Name of I	lens, Contract Mgr. at (770) 682-9091 Area Code & Daytime Telep	hana Numban)
(Name of r	retsou) (Area Code & Daytime Telep	mone (Number)
New Filing Division of Clifton Bui 2661 Execu	Corporations	MAILING New Filing S Division of G P.O. Box 63 Tallahassee,	Section Corporations 27
Enclosed is a check	for the following amount:		
\$70.00 Filing Fed	\$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.	Satellite Shelters, Inc. (Enter name of corporation; must include "INCORPORA	ATED""	COMPAN	ν" ·	CORPORATION	"			
	"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	,		•••	COM OIGHTON	,			
	(If name unavailable in Florida, enter alternate corporate	name ado	opted for the	he pur	pose of transacting	z busin	ess in Flo	orida)	
2.	hhamina			59989	•	r			
۷.	(State or country under the law of which it is incorporate	d) 		(FI	El number, if appli	cable)			
4	12/30/1987			Per	petual				
٦.	(Date of incorporation)	— ^{3.} —	Ouration:	Year	petual corp. will cease to	exist o	r "perpeti	ual")	
6.	Pending registration								
	(Date first transacted bus (SEE SECTIONS 607.1501 &					y)			
7.	2530 Xentum Lane North								
	(Principal offi Minneapolis, MN 55441	ce address	i)	<u>-</u> _		·			
	(Current maili	ng address	s)						
	Salemand lease of modular buildings and rel	ocatable	structu	res;	turnkey instal	latio	n		
8.	(Purpose(s) of corporation authorized in home state	te or count	try to be ca	arried	out in state of Flor	ida)		~	
_						,	ALC ALC	2007 APR 24	
9.	Name and street address of Florida registered agent	: (P.O. B	ox NOI	_acce	ptable)		AR AH	ΑPE	4321(44
	Name: HIQ Corporate Services, In	с.					ASS ASS	21	1
O	ffice Address: 1574 Village Square Blvd,	Suite 10	0				ECRETARY OF LLAHASSEE.		
	T-11-h				32309		FLORID.	A	S. Cont.
	(City)	 -	, Florid		Zip code)		SE S	വ	
	· •			,	/		¥	9	
). Registered agent's acceptance: aving been named as registered agent and to accept	t service (of proces.	s for t	the above stated	corno	ration a	t the pi	ace
de	esignated in this application, I hereby accept the app	pointmen	t as regis	stered	agent and agree	e to ac	t in this	capaci	ty. I
	orther agree to comply with the provisions of all state and I am familiar with and accept the obligations of i					perfo	rmance	of my	duties,
647	u r um junituu man unu uccept the ootigutions of t	my positi	011 43 168	, 60000					
	See -	attached		•					
	(Registered agent's sign	nature)			·				
11	. Attached is a certificate of existence duly authenti-	cated, no	t more tha	an 90	days prior to del	ivery (of this a _l	pplicati	ion 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:

Chairman:	Al Hilde, Jr.			
Address:	Route 65, 9555 Snake River Road			
	Jackson, WY 83001			
Vice Chairman:				
Address:				
Director:				
Address:				
Director:				 ·
Address:	······································			
···········				
B. OFFICERS				
President:	J. Martin Mullaney		·	
Address:	2520 Ventum Inno Nonth			
·	Minneapolis MN 55441			
Vice President:	Christopher Peterson	SEC	2007	CHAIR NA
Address:	2530 Xenium Lane North	AHA	APR	25627 104 8 25023.38
	Minneapolis, MN 55441	TARY O	24	in d
Secretary:	Thomas M. Vickman	m i		See House
Address:	2530 Xenium Lane North	<u> </u>	-: - <u>55</u>	
Tressaver:	Minneapolis. MN 55441	>		
easurer Audites:	Thomas M. Vickman			
NOTE: If necessar	y, you may attach an addendum to the application listing a	idditional officers and/or dir	ectors.	
13	Momai VM			
	(Signature of Director or Officer listed in number 12 of			

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF MICHIGAN, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the Corporation is: Satellite Shelters, Inc.
- 2. The name and address of the registered agent and office is:

HIQ CORPORATE SERVICES, INC. 1574 VILLAGE SQUARE BLVD SUITE 100 TALLAHASSEE FLORIDA 32309

Having been named as registered agent and to accept service of process for the above stated Corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

HIO CORPORATE SERVICES, INC.

KELLI FLANNERY, ASST SECRETARY HIQ CORPORATE SERVICES, INC

Filing Fee: \$35 for Designation of Registered Agent

SECRETARY OF STAT

STATE OF WYOMING Office of the Secretary of State

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Satellite Shelters, Inc.

is a

Profit Corporation

formed or qualified under the laws of Wyoming did on **December 30, 1987**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **1987-000245832**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 5th day of April, 2007 at 2:10 PM. This certificate is assigned 001130915.



Maj Massiele Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.