F07000003846

(Requestor's Name)			
(Address)			
(Address)			
(
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



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CRETARY OF STATE LAHASSEE, FLORIDA

7 JUL 31 KH 9: 1



COVER LETTER

TO: New Filin Division of	g Section of Corporations		
SUBJECT:	Marshfield Doo	orSystems Inc	
		rporation - must include suffix)	
Dear Sir or Madan	n:		
	stence," and check are submit	ion for Authorization to Transact Busines ted to register the above referenced foreig	
Please return all co	orrespondence concerning this	matter to the following:	•
Jean Lampi			
	(N	ame of Person)	
Marshfield D	oorSystems		
-	(F	irm/Company)	
PO Box 778	0 1401 E 4th St		
		(Address)	
Marshfield, \	NI 54449-7780		
	(City	/State and Zip code)	
For further information	ation concerning this matter, p	olease call:	
Jean Lampi	at (715 , 486-2486	
(Name of		(Area Code & Daytime Telephone Numb	er)
New Filing Division of Clifton Bu 2661 Exec	f Corporations	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a checl	c for the following amount:		
\$70.00 Filing Fe	ee \$78.75 Filing Fee & Certificate of Statu	s Certified Copy Cert	0 Filing Fee, ificate of Status & ified 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.

	iffeld DoorSystems Inc			
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")				
(If name u	navailable in Florida, enter alternate corporate name	e adopted for the purpose of transacting business in Florida)		
₂ Delaw	are	36-4402723		
(State or country under the law of which it is incorporated)		(FEI number, if applicable)		
4 11-6-2000		Perpetual		
(Date of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")		
6. 7-30-0	7			
	(Date first transacted business i	in Florida, if prior to registration)		
1401 F	4th St, Marshfield, WI 54449	502, F.S., to determine penalty liability)		
7. 1401 L	(Principal office add	ress)		
PO Box	k 7780, Marshfield, WI 54449-77	•		
	(Current mailing add	ress)		
	•	JUL LAH:		
。Wanuacumo				
(Purp	ose(s) of corporation authorized in home state or co	6 1 P 87		
9. Name and	street address of Florida registered agent: (P.O.	D. Box NOT acceptable)		
Name	e: Corporation Service Composis: 1201 Hays Street	O. Box NOT acceptable) OF STATE OF STA		
Office Addres	s: 1201 Hays Street	**************************************		
	Tallahasee (City)	, Florida <u>32301</u> (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 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. DIRECTORS	07 JUL 31 AM 9: 10			
Chairman: Jim Forrest				
Address: One Towne Square, Ste 780	SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Southfield, MI 48076	- LOUIDA			
Vice Chairman:				
Address:				
Director: Nathan Brown				
Address: 676 N Michigan Ave Ste 3700				
Chicago, IL 60611				
Director: John Reilly				
Address: 644 Spruce Ave				
Lake Forest, IL 60045				
B. OFFICERS				
President: Donald Bergman				
Address: 1401 E 4th St				
Marshfield, WI 54449-7780				
Vice President: Jeff Smith				
Address: 112 O'Connor St				
Greensboro, NC 27406				
Secretary: JoAnne Firestone				
Address: 1401 E 4th St, Marshfield, WI 54449				
- Ludi Voor				

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)

Bergman
(Typed or printed name and capacity of person signing application)

Treasurer:

Address: ___

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MARSHFIELD DOORSYSTEMS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIFTH DAY OF JULY, A.D. 2007.

O7 JUL 31 AH 9: 10
SECHETARY OF STATE
SECHETARY OF LORIDA



Darriet Smith Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5869924

DATE: 07-25-07

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