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COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: ARZES INDUSTRIES, INC.			
(Name of corporation - must include suffix)			
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation for Authorization to Transact Business "Certificate of Existence," and check are submitted to register the above referenced foreig transact business in Florida.			
Please return all correspondence concerning this matter to the following:			
THOMAS H KOPLIN (Name of Person) ARIES INDUSTRIES, INC. (Firm/Company)			
(Name of Person)			
ARIES INDUSTRIES, INC.			
(Firm/Company)			
550 ELIZABETH STREET (Address) WAUKESHA, WI 53186			
(Address)	-		
WAUKESHA, WI 53186			
(City/State and Zip code)			
For further information concerning this matter, please call:	2007 AUG -1 PH		
Name of Person) at (262) 446-5628 (Area Code & Daytime Telephone Number)			
(Name of Person) (Area Code & Daytime Telephone Number	I PH 2: 12 Y OF STATE EE, FLORIDA		
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:			
Certificate of Status Certified Copy Cert	0 Filing Fee, ificate of Status & ified Conv		

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. ARTES INDUSTRIES, 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. WISCONSIN
(State or country under the law of which it is incorporated)
4. MAY 15, 1985
(Date of incorporation)

3. 39-152106
(FEI number, if applicable)

FERPETUAL
(Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) SAME AS ABOVE (Current mailing address) 8. MANUFACTURE SALES AND SERVECE OF TRENCHLESS EQUIPMENT
(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) POMPANO BEACH, Florida 33069

(City) (Zip code) Name: Office Address: 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.

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:

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

ARIES INDUSTRIES, 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 May 15, 1985.

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 hereunto set my hand and affixed the official seal of the Department on March 15, 2007.

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

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:

36911-1A88F28E