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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE



COVER LETTER

TO: New Filing Section Division of Corporations						
SUBJECT: Oshkosh Indu	stries, Inc.					
(Name of corporation - must include suffix)						
Dear Sir or Madam:						
The enclosed "Application by Foreign Corporation for A "Certificate of Existence," and check are submitted to reg transact business in Florida.	uthorization to Transact Business in Florida," gister the above referenced foreign corporation to					
Please return all correspondence concerning this matter to	o the following:					
Richard Last						
Richard Last (Name of P Oshkosh Industries (Firm/Com	Person)					
_Oshkosh Industries	, Inc.					
(Firm/Com	pany)					
P.O. Box 2506 (Address O5hko5h, WI 54903 (City/State and						
(Addres	ss)					
Oshkosh, WI 54903	3					
(City/State an	d Zip code)					
For further information concerning this matter, please call Richard Last at (920)						
Richard Last at (920) 235-5890 (Name of Person) (Area Code & Daytime Telephone Number)						
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount: \$70.00 Filing Fee \$78.75 Filing Fee & \$5	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314					
The state of the s	78.75 Filing Fee & Ser.50 Filing Fee, Certified Copy Certified Copy Certified Copy					



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 8, 2008

RICHARD LAST P.O. BOX 2506 OSHKOSH, WI 54903

SUBJECT: OSHKOSH INDUSTRIES, INC.

Ref. Number: W08000046458

We have received your document for OSHKOSH INDUSTRIES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 408A00053088

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. 05	hkosh Inde	stries,	Inc.		.•	
(Enter name "Inc.," "Co.,	of corporation; must include " "Corp," "Inc," "Co," or "Co	"INCORPORATED, rp.")	" "COMPANY," "	'CORPORATION,"		• • • •
					. •	,
(If name una	vailable in Florida, enter alter	nate corporate name	adopted for the purp	pose of transacting b	usiness in Flori	da)
2. Wi	SCONSIN ntry under the law of which it	3.	20-8	835272	·	
(State or cour	ntry under the law of which it	is incorporated)	(FE	I number, if applicat	ole)	•
4. <u>Apr</u>	Date of incorporation)	5.	Perpe	.tual	st or "nemetual	<u>"</u>
	•			orp. will cease to ext	st of perpetual	
6. <u>/ / / / / / / / / / / / / / / / / / /</u>		transacted business in S 607.1501 & 607.15	Florida, if prior to		· · · · · · · · · · · · · · · · · · ·	
7. //2	7 5. Main	5+ . Os.	h Kosh, V	VI 549	02	
	•	•				· .·
P.O. 6	Box 2506,	Oshkosh	, WI	54903	300 O	
	· .(Current mailing addr	ess)		ECRE ECRE	Mr. at
8. <u>Sale</u>	of manufa	ctered u	rood fur	niture	75 Z2	
(Purpo:	se(s) of corporation authorize	d in home state or cou	entry to be carried o	ut in state of Florida	10000000000000000000000000000000000000	
9. Name and st	treet address of Florida reg	istered agent: (P.O.	Box NOT accep	table)		77
Name:	Kenneth J	Cunning	<u>ha</u> m	•		3
Office Address	: <u>8386 Ford</u>	ham La.			•	•
	Tallahass (Ci	ee	, Florida <u>32</u>	2305		٠,
	(Ci	ty)	(Z	ip code)		
10. Registered	l 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:	
A. DIRECTORS	MED
Chairman: N/A	08 OCT 20 PM 5: 05
Address:	ALI AHARY OF CT
·	SECRETARY OF STATE ALI AHASSEE, FLORIDA
Vice Chairman:	
}	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President:	
Address: 5162 Island View Drive	
Oshtash WI 5490/	
·	
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer: Mark Siewert	
Address: 451 Sesame-Street Road, Oshkosh, WI 54902	
NOTE: If necessary, you may attach, an addendum to the application listing additional of	ficers and/or directors.
13. /// 4 /// Ch	
(Signature of Director or Officer listed in number 12 of the application)	ion)
14. Martin J. Cowie President	- N
(Typed or printed name and capacity of person signing applicatio	11 <i>)</i>

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

OSHKOSH 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 April 12, 2007.

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 October 15, 2008.

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:

59172-7C4FC15D